

November 4, 2022

Subject: Deliverable 4.1.1 Develop Comprehensive Service Array for Current ND HCBS Service Options

Introduction

North Dakota’s HCBS 1915(c) and 1915(i) waiver program service array was compared to the Center for Medicaid and Medicare Services (CMS) suggested home and community-based services (HCBS) and comparable states with waivers like North Dakota. The purpose of the review is to assess North Dakota’s alignment with CMS recommendations and identify potential areas where North Dakota can improve its service options. This report also includes suggestions from the Medicaid and CHIP Payment and Access Commission on how to structure HCBS services.

Per CMS the purpose behind its suggestions for HCBS core services is to improve person-centered delivery of care in the recipients home and community¹. It recommends a variety of services that fall into two main categories: health services and human services. Health services can be further categorized between home health care and general health services. The services are intended to help “address the needs of people with functional limitations who need assistance with everyday activities” such as getting dressed or bathing, transportation, meals, medication management, or life skills. The objective is to enable people’s ability to remain in their homes and community rather than residing in an institutional care facility. CMS states that HCBS program waivers can offer a combination of services from one or both categories but do not need to offer all services in each waiver or across the waivers. The CMS HCBS support services list is a recommendation only.

During our research, we identified other states with comparable waivers that included service offerings not on the recommendation list from CMS and currently not offered in North Dakota HCBS waivers.

Other State Waiver Services Not Shared by North Dakota

Waiver services offered by comparison states were reviewed against the CMS HCBS suggested services to identify services offered in addition to the CMS recommendations. Comparing these additional services could aid North Dakota in identifying potential models for improvement within its service array.

The following outlines services provided by the comparison states not currently offered by North Dakota. Those services are either recommended by the CMS or are unique to that state’s existing service array. The four states used in this comparison are South Dakota, Colorado, Nebraska, and Montana, which are the same states used for comparison in prior project deliverables.

¹ Accessed at [Home- and Community-Based Services | CMS](#)

South Dakota

South Dakota has two waivers, the Home and Community-Based Options and Person-Centered Excellence (HOPE) Waiver and Assisted Daily Living Services Waiver, that are similar to North Dakota’s AD waiver. In addition to the services shared in the AD waiver with North Dakota, South Dakota also offers In-Home Nursing Services, Nutrition Supplements, Structured Family Caregiving, Supports for Participant Direction, and Vehicle Modifications.

Colorado

Colorado has two waivers similar to North Dakota’s AD waiver, the Complementary and Integrative Health Waiver and the Elderly, Blind and Disabled Waiver. In addition to the services shared in the AD waiver, Colorado offers Acupuncture, Chiropractic, Consumer Directed Attendant Support Services, In-Home Support Services, Life Skills Training, Massage Therapy, Medication Reminder (Supplies, Equipment, and Medication for Elderly, Blind, and Disabled), Peer Mentorship, Mentorship, and Transition Setup Services.

Colorado’s waiver related to Medically Fragile Children, Children's Home and Community Based Services Waiver, provides In-Home Nursing Services in addition to CMS recommended HCBS services.

The state’s Children’s Hospice waiver, HCBS Waiver for Children with Life-Limiting Illness, includes Bereavement Counseling, Massage Therapy, and Therapeutic Life Limiting Illness Support: Individual Counseling, Family Counseling, Group Counseling Services.

Colorado’s 1915i waiver, HCBS Waiver for Community Mental Health Supports, includes Life Skills Training, Peer Mentorship, Mentorship, Remote Support Technology, and Transition Setup Services.

Nebraska

Nebraska’s AD waiver, HCBS Waiver for Aged and Adults and Children with Disabilities, provides Extra Care for Children with Disabilities, Independence Skills Building, and Companion services in addition to the services similar to CMS Suggested HCBS services.

Montana

Montana’s AD Waiver, the Big Sky Waiver, provides Occupational Therapy, Physical Therapy, Speech Therapy, Audiology, Financial Management Services, Independence Advisor, Consultative Clinical and Therapeutic Services, Dietetic Service, Health and Wellness, Pain and Symptom Management, Post-Acute Rehabilitation, and Vehicle Modification Services.

Montana’s 1915i waiver, Severe and Disabling Mental Illness Home and Community Based Services, offers Behavioral Support Services, Consultative Clinical Services, Pain and Symptom Management, Behavioral Intervention Assistance, Health and Wellness, and Life Coaching Services.

The North Dakota HCBS Services Comparison with CMS Recommendations chart on the next page demonstrates how North Dakota aligns with CMS service recommendations and indicates where the other comparison states have adopted CMS recommendations. A cell in the chart denoted by “x” indicates that North Dakota offers a service that aligns with a CMS HCBS service category in one of its waiver offerings. A green cell indicates that a comparison state offers a service that aligns with the CMS HCBS service category in its corresponding waiver. A blank cell indicates that neither North Dakota nor the comparison states reviewed offer a service corresponding to a CMS HCBS suggested service category.

CHART 1: NORTH DAKOTA HCBS SERVICES COMPARISON WITH CMS RECOMMENDATIONS

CMS Suggested HCBS Services		North Dakota							
Category	Services	AD	MSP-PC	Autism	MFC	CH	SPED	Ex-SPED	1915i
Home Health Care	Skilled nursing care					x			
	Therapies: Occupational, speech, and physical					x			
	Dietary management by registered dietician				x				
	Pharmacy								
General Health Services	Durable medical equipment	x			x				
	Case management	x		x	x	x	x		x
	Personal care	x	x				x		
	Caregiver and client training								
	Health promotion and disease prevention								
	Hospice care (comfort care for patients likely to die from their medical conditions)					x			
Human Services (Supported Daily Living)	Senior centers								
	Adult daycares	x					x	x	
	Congregate meal sites								
	Home-delivered meal programs	x					x	x	
	Personal care (dressing, bathing, toileting, eating, transferring to or from a bed or chair, etc.)	x					x		
	Transportation and access	x			x		x	x	
	Home repairs and modifications	x			x		x	x	
	Home safety assessments	x							
	Homemaker and chore services	x					x	x	
	Information and referral services								x
	Financial services								
	Legal services, such as help preparing a will								
Telephone reassurance									

Key	
x	North Dakota Waiver Service
	Similar Comparison State Service
Blank	Neither ND nor Comparison State Offers that Service

Overall, North Dakota offers many of the CMS recommendations across their waivers. Optumas recommends North Dakota add health promotion and disease prevention education as a service interwoven across all areas of service and programs. Adding that service would enhance the effectiveness of North Dakota’s service offerings and provide better overall knowledge, improved outcomes, and satisfaction by the target populations and their families. Optumas additionally recommends exploring ways to incorporate more of the CMS suggested Home Health Care support services into appropriate North Dakota waivers, like in-home/community-based skilled nursing care, therapies (such as

occupational, speech, and physical), and dietary management by registered dietician services. Finally, Optumas recommends North Dakota consider incorporating innovative service offerings such as those offered in the comparison states.

Optumas also recommends that North Dakota reference to guidelines set forth by MACPAC when making future considerations in expanding HCBS services. These guidelines state that services should enhance community living and be person-centered. Services should also expand access and encourage the use of HCBS services by meeting the needs of diverse populations that use long term services and supports².

² Accessed at [Considerations in Redesigning the Medicaid Home- and Community-Based Services \(HCBS\) Benefit \(macpac.gov\)](https://macpac.gov/Considerations-in-Redesigning-the-Medicaid-Home-and-Community-Based-Services-(HCBS)-Benefit)