



Cross Disability Advisory Council Meeting



North Dakota
Cross Disability
Advisory Council

September 10, 2026





AGENDA

- I. CDAC Public Comment Policy**
- II. Welcome Activities**
- III. CDAC's Role in Drafting the CDW Application**
- IV. Overview of an HCBS Waiver Application**
- V. Connecting CDAC's Discussions to the CDW Application**
- VI. Deep Dive into the CDW Application – Introduction**
- VII. Deep Dive into the CDW Application – Appendix A**

Welcome Activities



Approach to September CDAC

❖ **Learn – Content Overview:** We want CDAC members to **understand:**

- ☐ What a Home and Community-Based Services (HCBS) Waiver Application is
- ☐ How the HCBS Waiver Application connects to the Cross-Disability Waiver (CDW)
- ☐ How CDAC's discussions and feedback connect to each of the sections in the CDW's Waiver Application
- ☐ What kinds of information are contained in certain sections of an HCBS Waiver Application

❖ **Discuss – Feedback:** We want CDAC's **input** on:

- ☐ How should families be told about the changes to North Dakota's (ND) children's waivers?
- ☐ Whether families know how and where to share feedback on their experiences in the waiver

Timeline Considerations: ND's 27-29 budget process begins in the late summer / early fall 2026. The Governor's Office budget recommendations will be released around December 2026. The 27-29 legislative session will happen between January and May 2027. We are focusing on topics that impact the waiver's cost so that we have this information to share with the legislature.



Acronyms We'll Use Today

We will be using these terms in our meeting today:

- **CDAC** – Cross-Disability Advisory Council
- **HCBS** – Home and Community-Based Services
- **LOC** – Level of Care
- **CDW** – Children's Cross-Disability Waiver
- **IID/DD** – Individuals with Intellectual Disabilities / Developmental Disabilities Waiver
- **ASD** – Autism Spectrum Disorder
- **MF** – Medically Fragile Waiver
- **ICF/IID** – Intermediate Care Facility for Individuals with Intellectual Disabilities
- **NF** – Nursing Facility
- **EI** – Early Intervention
- **ID** – Intellectual Disability
- **DD** – Developmental Disability
- **HHS** – North Dakota Health and Human Services
- **CMS** – Centers for Medicare and Medicaid Services



CDAC's Role in Drafting the CDW Application



Re-Introducing the HCBS Waiver Application to CDAC

Today we are going to re-visit a fundamental topic for CDAC's work.

- We have heard questions from CDAC about not knowing what a waiver is, or what a waiver application is.
- We have also heard questions from CDAC wondering how their contributions will inform the CDW.
- Today we will spend time explaining what the waiver application is.
- This will help show how CDAC's feedback is informing the development of the new waiver.



The Role of the HCBS Waiver Application

North Dakota (ND) has begun writing an application to the Centers for Medicare & Medicaid Services (CMS) to make the new Children's Cross-Disability Waiver (CDW).

- The new CDW that ND is making is a Home and Community-Based Services (HCBS) Waiver program.
 - These kinds of programs help people live and get help in their homes and communities.
- When we say we are “making a new HCBS waiver,” it means that a new state program is being created.
- Before that program can be launched, the state has to write an application to CMS and ask for federal approval.
 - States fill out an application in an online portal. Then a PDF of their entire response to the application is made.
- All states use the same template for their application. Once filled out, the applications are long – usually hundreds of pages.

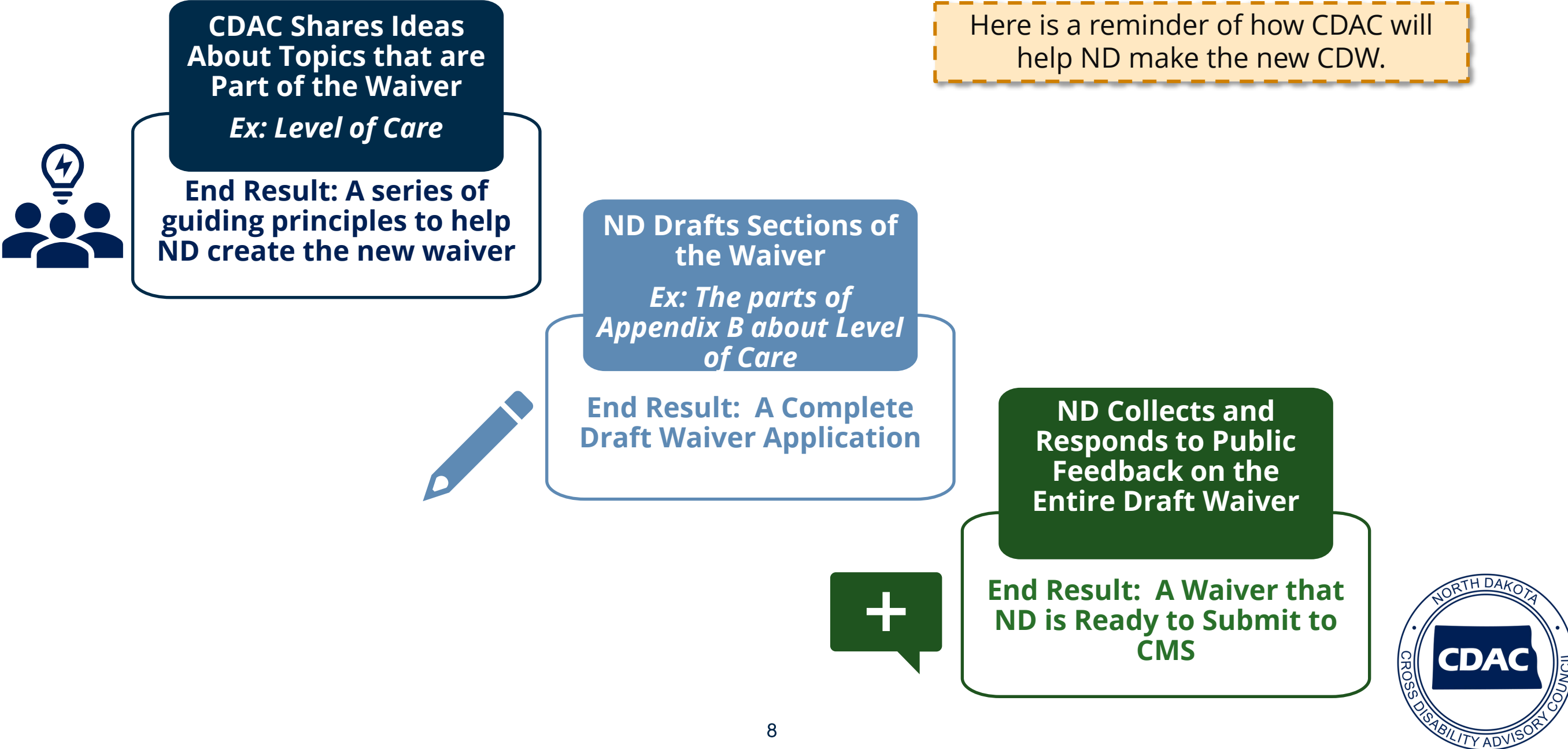


CDAC's guidance helps ND fill out the waiver application.

The approved waiver application is the “blueprint” for making the CDW.



How CDAC Feedback Helps ND Create the Waiver



How CDAC Feedback Helps ND Create the Waiver | Step 1



**CDAC Shares Ideas
About Topics that are
Part of the Waiver**

Ex: Level of Care

**End Result: A series of
guiding principles to help
ND create the new waiver**

This is what CDAC 1.0 did and what CDAC 2.0 has
been doing!

*CDAC will continue to provide guiding principles on new
topics related to the waiver as they are introduced.*



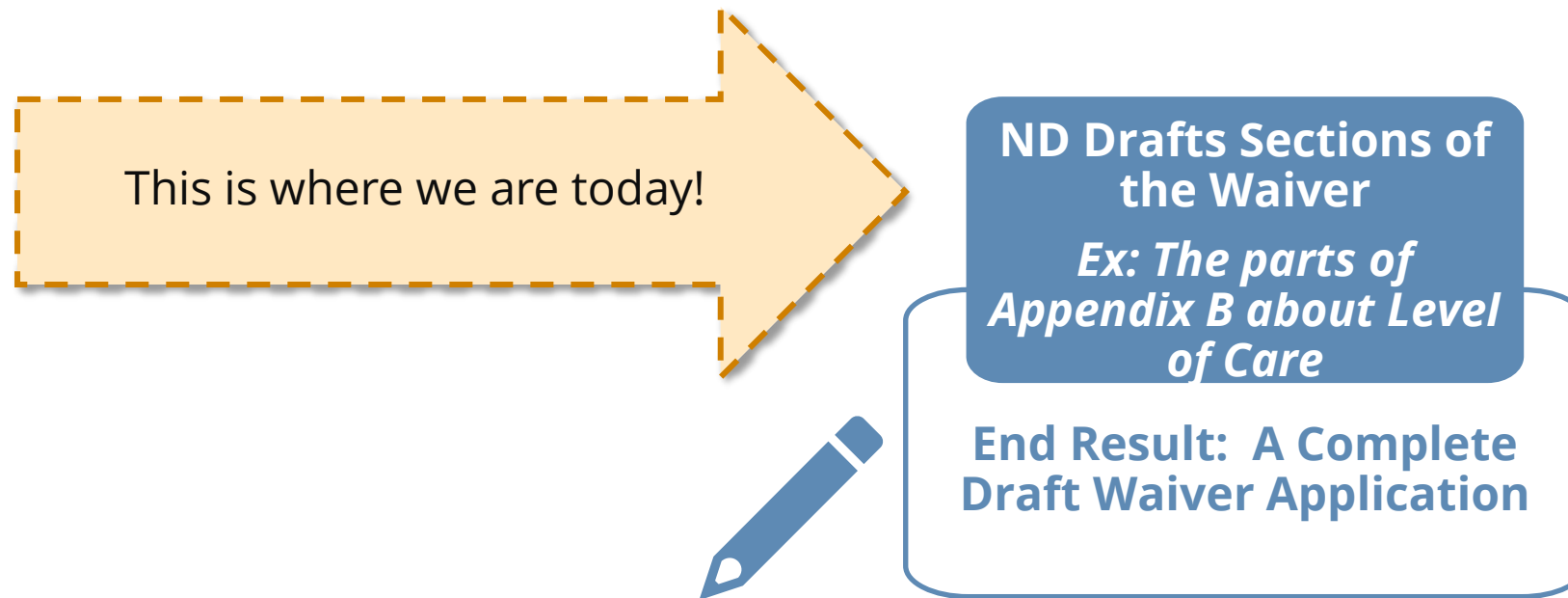
Step 1: CDAC Shares Ideas About Waiver Topics

Example Waiver Topic: Level of Care

- CDAC talks about how the new waiver should work. We focus on one topic at a time. CDAC shares what is important to them for each topic.
 - CDAC 2.0 will also review the relevant recommendations from CDAC 1.0. CDAC 2.0 works from this foundation, instead of starting over.
- A&M also asks specific questions. This helps us get feedback on what CMS asks in the waiver application.
 - Example question: "What do you think about national versus homegrown assessment tools?"
- CDAC creates guiding principles for each topic. The group votes on these principles. The final principles are CDAC's formal recommendations to HHS.
 - **Result: A series of guiding principles to help ND create the new waiver: "CDAC recommends using a national tool to ensure stronger validity and reliability, and easier and more consistent / standard administration."**



How CDAC Feedback Helps ND Create the Waiver | Step 2



Step 2: North Dakota Drafts Sections of the Waiver

Example Section: North Dakota Drafts the Waiver Section on Level of Care (Appendix B)

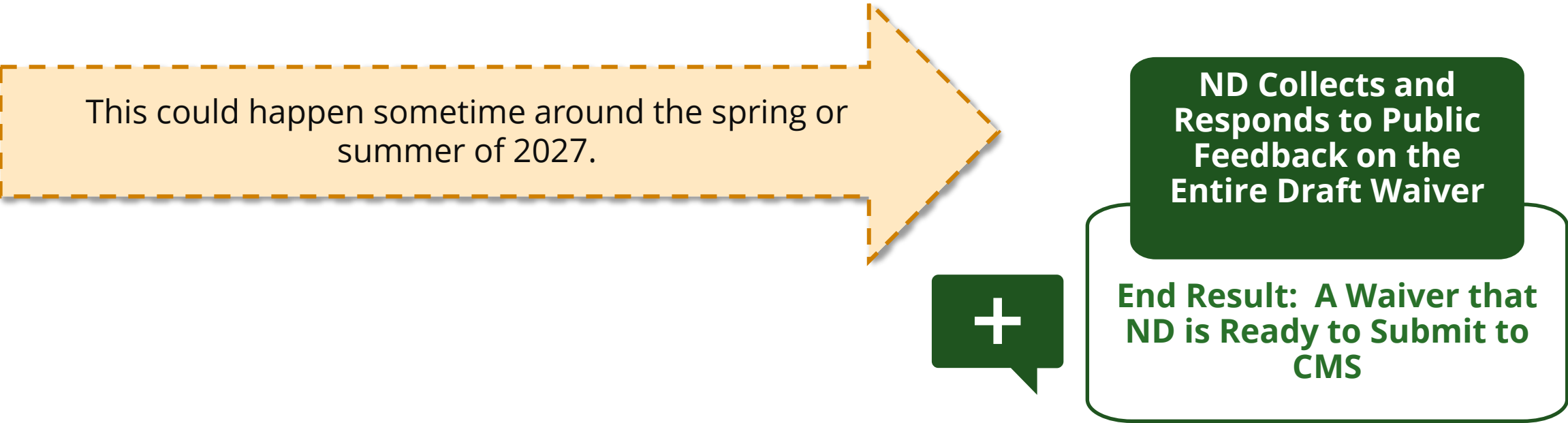
- CDAC creates formal guiding principles about waiver topics.
- HHS and A&M draft the waiver sections that CDAC has talked about. They use CDAC's guiding principles as core input.
- A&M may come back to CDAC to ask follow-up questions while writing.
- A&M creates and shares a summary of part of the waiver with CDAC once it is drafted.
- A&M will coordinate any changes with HHS so HHS can make decisions about what is included in the waiver application.
- When all sections are done, we have a full draft application.



Result: A complete draft waiver application.



How CDAC Feedback Helps ND Create the Waiver | Step 3



Step 3: North Dakota Holds Public Comment

Example: Online Meeting to Ask for Feedback

- HHS will publish the entire draft waiver application online once it is complete.
- ND will hold official public comment on the full draft.
- Public comment includes many ways for people to share their feedback, for example:
 - Townhalls / meetings.
 - Written letters.
 - Emailed comments.
- The State will summarize and respond to all public feedback in the waiver document. This is the final piece of the draft.



Result: A complete waiver application that ND is ready to submit to CMS for review



Overview of an HCBS Waiver Application



Who Is the HCBS Waiver Application For?

All HCBS waiver applications are written for CMS as the audience.

- CMS designed the waiver application template. It allows them to ask all the questions they would need to know about a program, to give a state approval to make the waiver.
- When reading an HCBS waiver application, it is important to remember it was written for a federal regulatory body as the audience.
 - It is written to explain how the state will operate the waiver on a day-to-day basis.
 - The way it is written doesn't exactly reflect how people with disabilities and their families experience the waiver on a day-to-day basis.



This means that some things CDAC wants will not appear in the application.

That doesn't make them less important – they might be found in ND's policies and procedures instead.



How CDAC Will Learn About the CDW Application

Each month, CDAC will get more information about one or two of the sections of the new waiver's application.

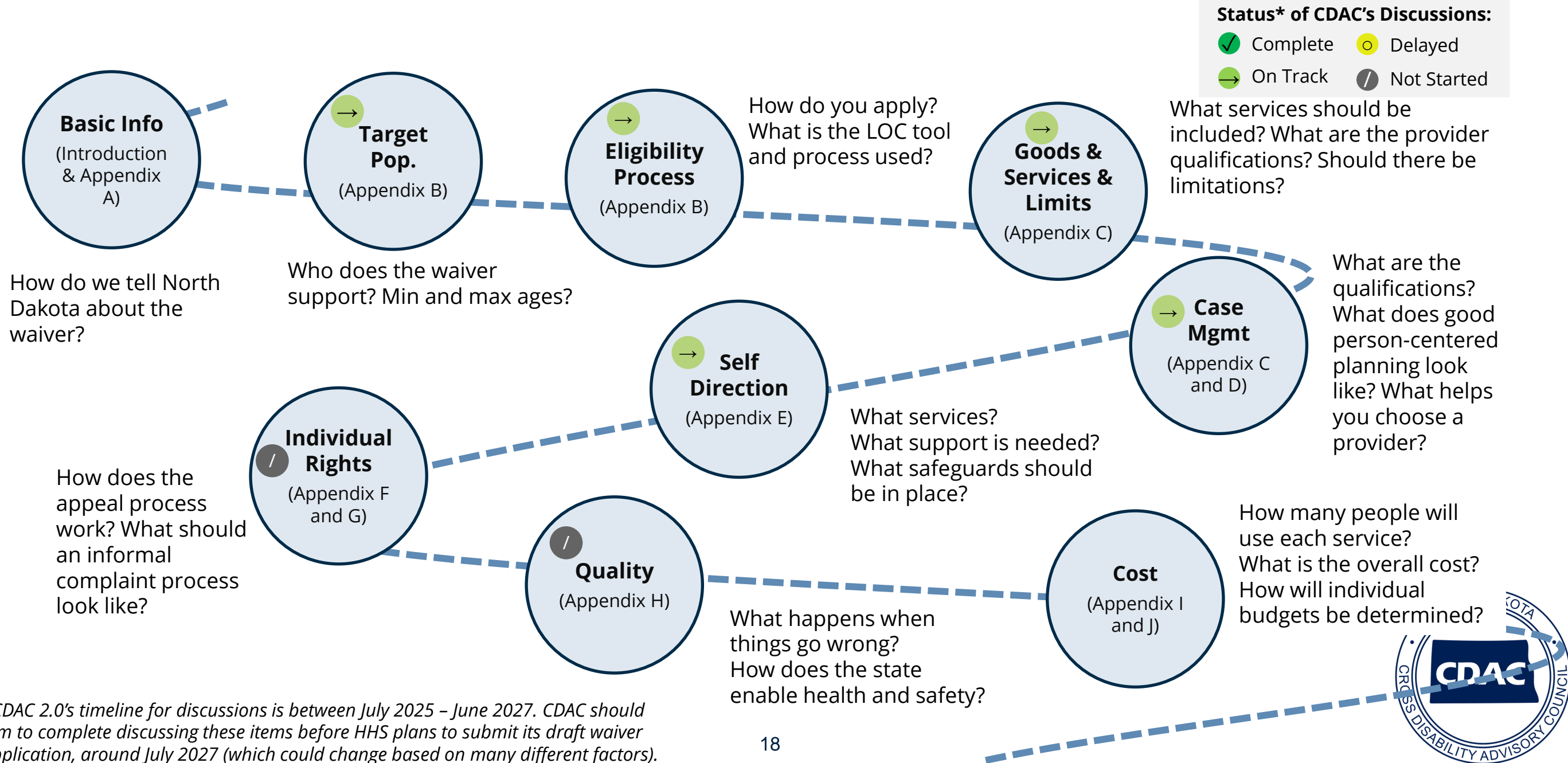
- The waiver is broken up into multiple sections, called "Appendices" (Appendix A, Appendix B, Appendix C, etc.).
- The waiver application's appendices are where most of the information about the HCBS waiver is stored.
- Each month, CDAC will learn more about one or two of the waiver appendices. We will talk about what kind of information is in each appendix.
- ND will ask CDAC any questions it has that are relevant for that appendix. **CDAC's insight will help ND to write that part of the waiver application.**
- **Next, let's walk through the structure of the HCBS waiver application and its appendices at a high level. Then, we will introduce some of the appendices to you.**



This overview will focus on the kind of information CMS asks for in each appendix. ND won't show CDAC drafts of appendices. CDAC will see the entire draft CDW application during the formal public comment process.



What's in a Waiver? The Pieces of a Waiver Application



Breaking Down the Waiver Document: High-Level Overview

Waiver documents are long and complicated – but good policy is found in the details.

The waiver's appendices hold the most important information – who it helps, what services it has, and how much it costs.

Before the appendices, there is some important introduction information:

1. **Waiver Request Information:** Title, dates, type of request, applicable Levels of Care (LOC) applied. In amendment requests, states must list what changed and why.
2. **Brief Waiver Description:** One page, plain-language summary.
3. **Request for Policies Waived:** Certain social security policies waived.
4. **Assurances:** Agreements the state makes to uphold components including health and welfare and expenditures.
5. **Public Input:** How the state collected / responded to public input.
6. **Contact Personnel & Authorizing Signature.**

These are examples of what two pages of CMS' template for the waiver application look like. You do not need to read this – we will walk through a demonstration together next.

1. Request Information (1 of 3)

A. The **State of North Dakota** requests approval for a Medicaid home and community-based services (HCBS) waiver under the authority of section 1915(c) of the Social Security Act (the Act).

B. **Program Title** (optional - this title will be used to locate this waiver in the finder):

Traditional IID/DD Home and Community Based Services Waiver

C. **Type of Request:** amendment

Requested Approval Period: (For new waivers requesting five year approval periods, the waiver must serve individuals who are dually eligible for Medicaid and Medicare.)

☐ 3 years ☒ 5 years

Original Base Waiver Number: ND.0037

Waiver Number: ND.0037.R09.02

Draft ID: ND.007.09.02

D. **Type of Waiver** (select only one):

Regular Waiver

E. **Proposed Effective Date of Waiver being Amended:** 04/01/24

Approved Effective Date of Waiver being Amended: 04/01/24

2. Brief Waiver Description

Brief Waiver Description. In one page or less, briefly describe the purpose of the waiver, including its goals, objectives, organizational structure (e.g., the roles of state, local and other entities), and service delivery methods.

North Dakota's Home and Community Based Waiver for Individuals with Intellectual Disabilities (IID) and related conditions provides an array of provider managed and participant directed services in order for individuals of all ages to have the opportunity to receive community alternatives to institutional placement. The State Medicaid agency, which is under the umbrella of the North Dakota Department of Health and Human Services, is responsible to administer the waiver.

Applicants may access waiver services at the eight regional human service centers located throughout the State. The DD Program unit at each human service center is responsible for the determination of eligibility, to assist participants in accessing waiver services and monitoring of services selected by the participant. The services are to provide support for conditions specifically related to IID/DD. Services and supports are provided by private non and for-profit providers licensed by the Developmental Disabilities (DD) Section; and qualified service providers who are independent contractors enrolled with Medical Services within the Department of Health and Human Services (Department). A fiscal agent assists participants and their families who wish to self-direct their services.

Understanding the Waiver Appendices: A Bird's Eye View

Appendices are where all the program details live!

Apnd.	Title	Key Information Included
A	Waiver Administration and Operation	Waiver operating agency, oversight, use of contracted entities
B	Participant Access and Eligibility	Target groups served, number of participants expected to be served each year, Medicaid eligibility requirements, LOC procedures
C	Participant Services	Services provided through the waiver, including limits, and provider qualifications for service delivery
D	Participant-Centered Service Planning and Delivery	Details regarding the service planning process, including development of participant-centered plan of care
E	Participant Direction of Services	Identification of self-directed service options, supports available to participants to assist with self-direction
F	Participant Rights	Fair hearing rights and other information on grievances and complaints
G	Participant Safeguards	Protections for health and welfare of participants
H	Quality Improvement Strategy	Waiver systems improvement
I	Financial Accountability	Methods for waiver service payments
J	Cost-Neutrality Demonstration	Projections for utilization and overall spending, based on rates

What an HCBS Waiver Application Looks Like

Before we start to talk about some specific appendices, let's show what ND's current children's waivers look like!

Click on each of the links below to access a PDF of these waiver applications:

1. Individuals with Intellectual / Developmental Disabilities (IID/DD) Waiver

Application for 1915(c) HCBS Waiver: ND.0037.R09.04 - Jun 01, 2026 (as of Jun 01, 2026) Page 1 of 211

Application for a §1915(c) Home and Community-Based Services Waiver

PURPOSE OF THE HCBS WAIVER PROGRAM

The Medicaid Home and Community-Based Services (HCBS) waiver program is authorized in section 1915(c) of the Social Security Act. The program permits a state to furnish an array of home and community-based services that assist Medicaid beneficiaries to live in the community and avoid institutionalization. The state has broad discretion to design its waiver program to address the needs of the waiver's target population. Waiver services complement and/or supplement the services that are available to participants through the Medicaid state plan and other federal, state and local public programs as well as the supports that families and communities provide.

The Centers for Medicare & Medicaid Services (CMS) recognizes that the design and operational features of a waiver program will vary depending on the specific needs of the target population, the resources available to the state, service delivery system structure, state goals and objectives, and other factors. A state has the latitude to design a waiver program that is cost-effective and employs a variety of service delivery approaches, including participant direction of services.

Request for an Amendment to a §1915(c) Home and Community-Based Services Waiver

1. Request Information

A. The State of North Dakota requests approval for an amendment to the following Medicaid home and community-based services waiver approved under authority of §1915(c) of the Social Security Act.

B. Program Title:
Traditional IID/DD Home and Community Based Services Waiver

C. Waiver Number: ND.0037
Original Base Waiver Number: ND.0037.

D. Amendment Number: ND.0037.R09.04

E. Proposed Effective Date: (mm/dd/yy)
06/01/26

Approved Effective Date: 06/01/26
Approved Effective Date of Waiver being Amended: 04/01/24

2. Purpose(s) of Amendment

Purpose(s) of the Amendment. Describe the purpose(s) of the amendment:

2. Autism Spectrum Disorder (ASD) Waiver

Application for 1915(c) HCBS Waiver: ND.0842.R03.01 - Nov 01, 2025 (as of Nov 01, 2025) Page 1 of 151

Application for a §1915(c) Home and Community-Based Services Waiver

PURPOSE OF THE HCBS WAIVER PROGRAM

The Medicaid Home and Community-Based Services (HCBS) waiver program is authorized in section 1915(c) of the Social Security Act. The program permits a state to furnish an array of home and community-based services that assist Medicaid beneficiaries to live in the community and avoid institutionalization. The state has broad discretion to design its waiver program to address the needs of the waiver's target population. Waiver services complement and/or supplement the services that are available to participants through the Medicaid state plan and other federal, state and local public programs as well as the supports that families and communities provide.

The Centers for Medicare & Medicaid Services (CMS) recognizes that the design and operational features of a waiver program will vary depending on the specific needs of the target population, the resources available to the state, service delivery system structure, state goals and objectives, and other factors. A state has the latitude to design a waiver program that is cost-effective and employs a variety of service delivery approaches, including participant direction of services.

Request for an Amendment to a §1915(c) Home and Community-Based Services Waiver

1. Request Information

A. The State of North Dakota requests approval for an amendment to the following Medicaid home and community-based services waiver approved under authority of §1915(c) of the Social Security Act.

B. Program Title:
Autism Spectrum Disorder (ASD) Birth through Twenty

C. Waiver Number: ND.0842

D. Amendment Number: ND.0842.R03.01

E. Proposed Effective Date: (mm/dd/yy)
11/01/25

Approved Effective Date: 11/01/25
Approved Effective Date of Waiver being Amended: 11/01/23

2. Purpose(s) of Amendment

Purpose(s) of the Amendment. Describe the purpose(s) of the amendment:

3. Medically Fragile (MF) Waiver

Application for 1915(c) HCBS Waiver: ND.0568.R04.00 - Jun 01, 2026 Page 1 of 170

Application for a §1915(c) Home and Community-Based Services Waiver

PURPOSE OF THE HCBS WAIVER PROGRAM

The Medicaid Home and Community-Based Services (HCBS) waiver program is authorized in section 1915(c) of the Social Security Act. The program permits a state to furnish an array of home and community-based services that assist Medicaid beneficiaries to live in the community and avoid institutionalization. The state has broad discretion to design its waiver program to address the needs of the waiver's target population. Waiver services complement and/or supplement the services that are available to participants through the Medicaid state plan and other federal, state and local public programs as well as the supports that families and communities provide.

The Centers for Medicare & Medicaid Services (CMS) recognizes that the design and operational features of a waiver program will vary depending on the specific needs of the target population, the resources available to the state, service delivery system structure, state goals and objectives, and other factors. A state has the latitude to design a waiver program that is cost-effective and employs a variety of service delivery approaches, including participant direction of services.

Request for a Renewal to a §1915(c) Home and Community-Based Services Waiver

1. Major Changes

Describe any significant changes to the approved waiver that are being made in this renewal application:

five year renewal.
corrected ND Department of Human Services to ND Health and Human Services.
updated budget under environmental modifications to current budget level of \$25,300.00.

Application for a §1915(c) Home and Community-Based Services Waiver

1. Request Information (1 of 3)

A. The State of North Dakota requests approval for a Medicaid home and community-based services (HCBS) waiver under the authority of section 1915(c) of the Social Security Act (the Act).

B. Program Title (optional - this title will be used to locate this waiver in the finder):
North Dakota Medicaid Waiver for Medically Fragile Children

C. Type of Request: renewal

Requested Approval Period: (For new waivers requesting five year approval periods, the waiver must serve individuals who are dually eligible for Medicaid and Medicare.)

If you are reading a printed copy of these slides, these PDFs are also available on the HHS website:
<https://www.hhs.nd.gov/healthcare/medicaid/medicaid-waivers>



Connecting CDAC's Discussions to the CDW Application



North Dakota
Cross Disability
Advisory Council

How CDAC Helps: Understanding How CDAC's Discussion Topics Map to the Waiver

Status of CDAC's Discussions:

- ✔ Complete ○ Delayed
- On Track / Not Started

DRAFT

App.	Title	CDAC Areas of Feedback Used to Inform Application
A	Waiver Administration and Operation	N/A – administrative in nature
→ B	Participant Access and Eligibility	What groups / conditions should be included? How do you apply? What is the LOC tool and process used?
→ C	Participant Services	What services should be included? What are the provider qualifications? Should there be limitations?
→ D	Participant-Centered Service Planning and Delivery	What does good person-centered planning look like? What is the role of case managers in supporting participants?
→ E	Participant Direction of Services	What services can be self-directed? What support is needed? What safeguards should be in place?
/ F	Participant Rights	How does the appeal process work? What should an informal complaint process look like?
/ G	Participant Safeguards	What happens when things go wrong? How does the state enable health and safety?
/ H	Quality Improvement Strategy	How do you know when a program is working well?
I	Financial Accountability	N/A – administrative in nature
J	Cost-Neutrality Demonstration	N/A – administrative in nature



Connecting the Pieces | CDAC and the CDW Application

(1 of 3)

DRAFT

CDAC has already discussed and provided feedback on multiple sections of the HCBS Waiver Application (July – December 2025).

Month	CDAC’s Topics	Related Section of the HCBS Waiver Application
July 2025 <i>(in-person)</i>	• Medicaid 101 • ND’s Waiver Modernization goals and CDAC 2.0’s role	• Introduction
August 2025	• Assessment Tools / Level of Care	• Appendix B – Access & Eligibility
September 2025	• CDW SubCommittee: Target Populations • IID/DD SubCommittee: ID/DD Definitions	• Appendix B – Access & Eligibility
October 2025 <i>(in-person)</i>	• Level of Care • CDW Service Array	• Appendix B – Access & Eligibility • Appendix C – Services & Limits
November 2025	• CDW SubCommittee: Target Populations, Service Modalities • IID/DD SubCommittee: Target Populations	• Appendix B – Access & Eligibility • Appendix C – Services & Limits
December 2025	• CDW SubCommittee: Service Modalities • IID/DD SubCommittee: Target Populations	• Appendix B – Access & Eligibility • Appendix C – Services & Limits



CDAC has already discussed and provided feedback on multiple sections of the HCBS Waiver Application (January – April 2026).

Month	CDAC’s Topics	Related Section of the HCBS Waiver Application
January 2026 (in-person)	• Status of Waiver Development • ID/DD Definitions • Target Populations • Service Modalities (Paid Family Caregiving)	• Entire waiver • Appendix B – Access & Eligibility • Appendix C – Services & Limits
February 2026	• Paid Family Caregiver	• Appendix B – Access & Eligibility • Appendix C – Services & Limits
March 2026	• Paid Family Caregiver • CDW Service Array and Modalities	• Appendix C – Services & Limits
April 2026 (in-person)	• Status of Waiver Development • Provider Structure • Level of Care • Case Management • Self-Direction • CDW Service Array and Modalities	• Entire waiver • Appendix C – Services & Limits • Appendix D – Person-Centered Planning • Appendix E – Participant Direction



CDAC has already discussed and provided feedback on multiple sections of the HCBS Waiver Application (May – August 2026).

Month	CDAC’s Topics	Related Section of the HCBS Waiver Application
May 2026	• Provider Structure • Case Management • CDW Service Array and Modalities • ND’s Budget Landscape • Budgeting for CDW	• Appendix B – Access & Eligibility • Appendix C – Services • Appendix D – Person-Centered Planning • Appendix E – Participant Direction • <i>Entire waiver</i>
June 2026	• Provider Structure • Case Management • Budgeting for the CDW	• Appendix B – Access & Eligibility • Appendix C – Services & Limits • Appendix D – Person-Centered Planning • <i>Entire waiver</i>
July 2026 (in-person)	• Level of Care • Front Door Journey • Budgeting for the CDW	• Appendix B – Access & Eligibility • Appendix C – Services & Limits • <i>Entire waiver</i>
August 2026	• Level of Care	• Appendix B – Eligibility



What's Next for CDAC to Learn and Share About?

Here is a TENTATIVE schedule of when CDAC will get an overview of each Appendix. This is subject to change based on multiple circumstances. CDAC might also be discussing other topics during this time.

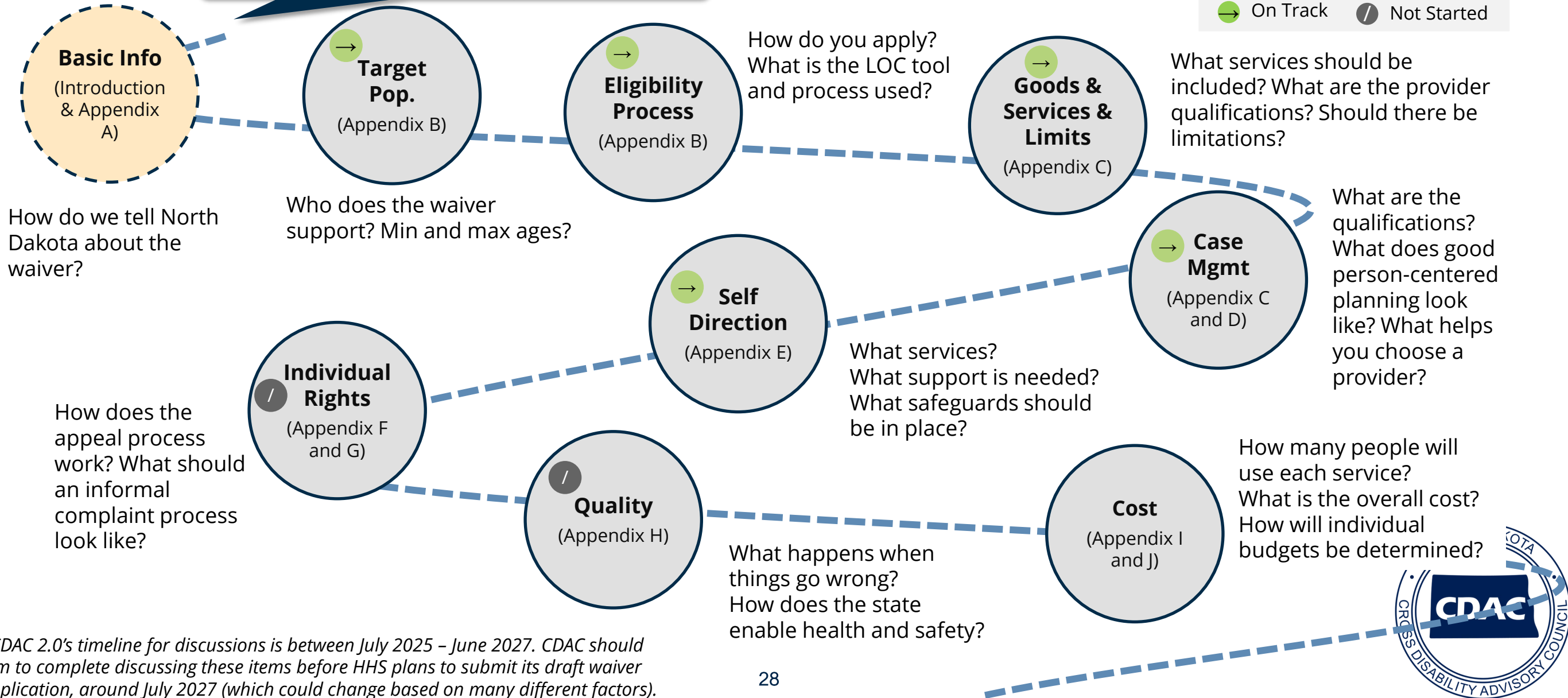
Month	Which Appendix of the HCBS Waiver Application <u>Might</u> Be Covered
October 2026 (in-person)	None, will be reviewing the draft CDAC 2.0 report instead
November 2026	Appendix E – Self-Direction
December 2026	Appendix D – Person-Centered Planning
January 2027 (in-person)	- Appendix B – Access & Eligibility - Appendix C – Services & Limits
February 2027	- Appendix F – Participant Rights - Appendix G – Participant Safeguards
March 2027	- Appendix H – Quality - Performance Measures
April 2027 (in-person)	- Appendix I – Financial Accountability - Appendix J – Cost-Neutrality
May 2027	None, potentially discussing overall impact of Legislature's passed 27-29 biennium budget
June 2027 (in-person)	None, potentially discussing entire waiver application being prepared for CMS submission

What's in a Waiver? What We'll Cover Today

We will focus on these parts of the CDW today!

Status* of CDAC's Discussions:

- ✓ Complete
- Delayed
- On Track
- / Not Started



*CDAC 2.0's timeline for discussions is between July 2025 – June 2027. CDAC should aim to complete discussing these items before HHS plans to submit its draft waiver application, around July 2027 (which could change based on many different factors).



Deep Dive into the CDW Application – Introduction



Explaining the HCBS Waiver Application | The Introduction

The Introduction of an HCBS Waiver Application is where a state lays out basic information about their waiver program.

Here are some things that are included in the Introduction:

Waiver Information

Waiver Description

Waiver Transition Plan



The Introduction | Explaining This Section (1 of 3)

Here is the kind of information CMS asks for in this section of the Introduction.

Waiver Information

Connecting This Section to CDAC's Work

CDAC has frequently discussed LOC. Who runs the waiver is administrative and outside of CDAC's scope.

Name of the waiver:

The state says here what the waiver is going to be called.

What Level of Care (LOC) is used for eligibility:

The state says here what kinds of institutions would people on this waiver otherwise be served in, if not for getting help in their homes and communities through this waiver?

Remember, here are the three kinds of institutions states pick from in this answer:

- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) (such as LSTC or Anne Carlsen Center) – ***the ASD and IID/DD Waivers use this LOC today***
- Nursing Facility (such as Missouri Slope or Eventide) – ***the MF Waiver uses this LOC today***
- Hospital (such as Sanford) – ***none of ND's children's waivers use this LOC today***

Contact information of the person who runs the waiver:

The state says here who is responsible for the waiver.

This person will answer any questions CMS has about the program.



The Introduction | Explaining This Section (2 of 3)

Here is the kind of information CMS asks for in this section of the Introduction.

Waiver Description

Connecting This Section to CDAC's Work

CDAC has frequently and will continue to discuss the goals and objectives of the new waiver.

What the waiver's goals are:

The state must list the purpose of the waiver, such as:

- Goals
- Objectives
- What other groups help run the waiver
- Service delivery methods

If this application is to amend or renew the original application, what is changing and why:

This would include things like whether a new service was added, or if the target population of the waiver changed.

The state must explain why it's making this change and how it will address impacts to waiver participants.

How the state collected public input, and how the state reflected that input in the waiver:

This section is written after the state holds public comment.

The state will say what kind of feedback it got, and how they included that feedback in the final draft of the application.



The Introduction | Explaining This Section (3 of 3)

Here is the kind of information CMS asks for in this section of the Introduction. **ND HHS has started writing this section of the waiver and has some questions for CDAC. CDAC's answers will help ND write this section.**

Transition Plan

What is the transition plan for kids currently receiving waived services:

CMS uses this question to ask states to explain how they will tell people about the new waiver, especially if it impacts other waivers.

ND will need to tell CMS about how populations will transition over to the CDW.

ND wants to hear from CDAC!

1. **How** should ND tell families about the new waiver? **When? How often?**
2. For families who will be transitioning to the CDW:
 - a. **What** should they be told about this transition?
 - b. What **questions** might they have about this transition?
3. For families who aren't being served on any of ND's waivers today, but who might want to seek support from the CDW – **what** should they be told about the new waiver?



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Deep Dive into the CDW Application – Appendix A



Explaining the HCBS Waiver Application | Appendix A

Appendix A is called “Waiver Administration and Operation.” It explains who is responsible for the waiver.

Here are some things that are included in Appendix A:

Who Is In Charge of the Waiver?

Who Else Helps Administer the Waiver?

Who Is Responsible for Fixing Problems?



Appendix A | Explaining This Section (1 of 3)

Here is the kind of information CMS asks for in this section of Appendix A.

Who Is In Charge of the Waiver?

Authority for the Waiver (Organizational Structure):

The state lists the name of the agency that is responsible for the waiver.

States must specify if that agency is not the same group as the State Medicaid Agency.

If a different agency runs the waiver, the state explains how the Medicaid Director checks on how well that agency is running the waiver.

Connecting This Section to CDAC's Work

Who is in charge of the waiver is administrative and outside of CDAC's scope.



Appendix A | Explaining This Section (2 of 3)

Here is the kind of information CMS asks for in this section of Appendix A.

Who Else Helps Administer the Waiver?

Connecting This Section to CDAC's Work

Who the state works with to run the waiver is administrative and outside of CDAC's scope.

Whether the state uses contracted entities:

The state says here whether it works with any contracted groups.

This could be a group that does the eligibility assessments.

It could also be the Fiscal Management Services (FMS) vendor that helps participants self-direct their services.

Whether the state works with local or regional non-state entities:

The state says here whether it works with any contracted groups.

This could be groups that aren't a part of the state that sign a Memorandum of Understanding (MOU) with the state to perform certain functions of the waiver.

Roles and responsibilities:

CMS provides a standard list of responsibilities for the people that run a waiver.

The state checks off each responsibility that all the groups who run the waiver have.



Appendix A | Explaining This Section (3 of 3)

Here is the kind of information CMS asks for in this section of Appendix A. **ND HHS has started writing this section of the waiver and has some questions for CDAC. CDAC's answers will help ND write this section.**

Who Is Responsible for Fixing Problems?

Who oversees the groups that help run the waiver:

The state says here what agency is responsible for monitoring the groups that help run the waiver.

The state says how often their quality and performance is assessed, and how they do that.

ND wants to hear from CDAC!

Think about **how you might answer, as well as how other families** who are receiving waived services **might answer**:

1. Do **you** know how to talk to ND about your experiences on the waiver? Do you think **other families** know how to?
2. Do your Case Managers ask you about your experiences on the waiver? Do you think Case Managers ask **other families** about their experiences?
 - You might also call these people "DDPMs" or "Service Managers."
3. How do **you and other families** want to share feedback about your experiences on the waiver?



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Next Steps for CDAC

Thank you for your valuable insights today!

- Your discussion today about certain parts of the Introduction and Appendix A of the new waiver's application will help ND to write those sections.
 - **If ND has additional questions about this section, they will follow-up with CDAC.**
 - Remember, there are other things – like federal regulations and the state's budget – that will influence what is written in the application.
- Over the next few months, CDAC will continue to get a closer look at each appendix of the HCBS waiver application.
 - HHS will ask CDAC any questions it has about those sections. CDAC's answers could help ND write that section.
- **During public comment, CDAC will see the full draft waiver application – the document that CDAC's input helped shape.**
 - **Public comment could happen in the spring or summer of 2027, but that timing could change based on many factors.**

