DRAFT - CROSS-DISABILITIES ADVISORY COUNCIL - DRAFT

Hybrid Meeting

Thursday, OCT 15, 2026

1:01 p.m. – 4:07 p.m.

Cross-Disability Advisory Council Members Present: Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Julianne Horntvedt, Kayla Johnson, Heather Lundeen, Kevin Miiller, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
Cross-Disability State Agency Representatives Present: Jackie Adusimilli, Kathy Barchenger, Kayla Fender, Karla Kalanek, Mary McCarvel-O'Connor, Kirsten Vandervorst
Guests Present: Erin Leveton, Kathy Miiller, Erin Moore, Jillian Salmon

WELCOME and ADMINISTRATIVE MATTERS

- The meeting was called to order at 9:35 am.

GENERAL BUSINESS

- Roll Call

- APPROVAL OF CDAC SEP Minutes
  - Kevin Miiller opened the floor for discussion on the "ND-CDAC Minutes 10SEP26 DRAFT"
  - Motion: It was moved by Kayla Johnson and seconded by Darcy Andahl to approve the 10SEP26 Minutes
  - Vote (Yes): Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Julianne Horntvedt, Kayla Johnson, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
  - Vote (No): none
  - Motion carried

CDAC 2.0 REPORT

- Members closely reviewed a report that was written to summarize their recommendations for North Dakota Health and Human Services (HHS) to modernize children's waivers.
  - Members went through each chapter, closely reviewing the slides and offering adjustments to make sure it exactly reflects their perspectives.
- Members requested several changes such as a table of contents page listing page numbers and a thank you page.
- Members requested an email containing the direct links to the report to be sent to all members.
- After making minor revisions, members voted to approve the report.
- Members who were not present to vote on the CDAC 2.0 Report will be sent the updated report to review and their votes will be captured by email.

- APPROVAL OF CDAC 2.0 Progress Report
  - Kevin Miiller opened the floor for discussion on the "CDAC 2.0 Progress Report October 2026 DRAFT"
  - Motion: It was moved by Kyle Erickson and seconded by Darcy Andahl to vote to approve if each section of the CDAC 2.0 Progress Report October 2026 DRAFT captured the intent of CDAC2 as written.
    - Each section was reviewed, discussed, then voted on

- Vote (Yes): Executive Summary
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

- Vote (Yes): North Dakota's Vision and Approach to Modernizing Children's Waivers
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

- Vote (Yes): Proposed Solution #1: Create a New, Streamlined Children's Cross-Disability Waiver
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

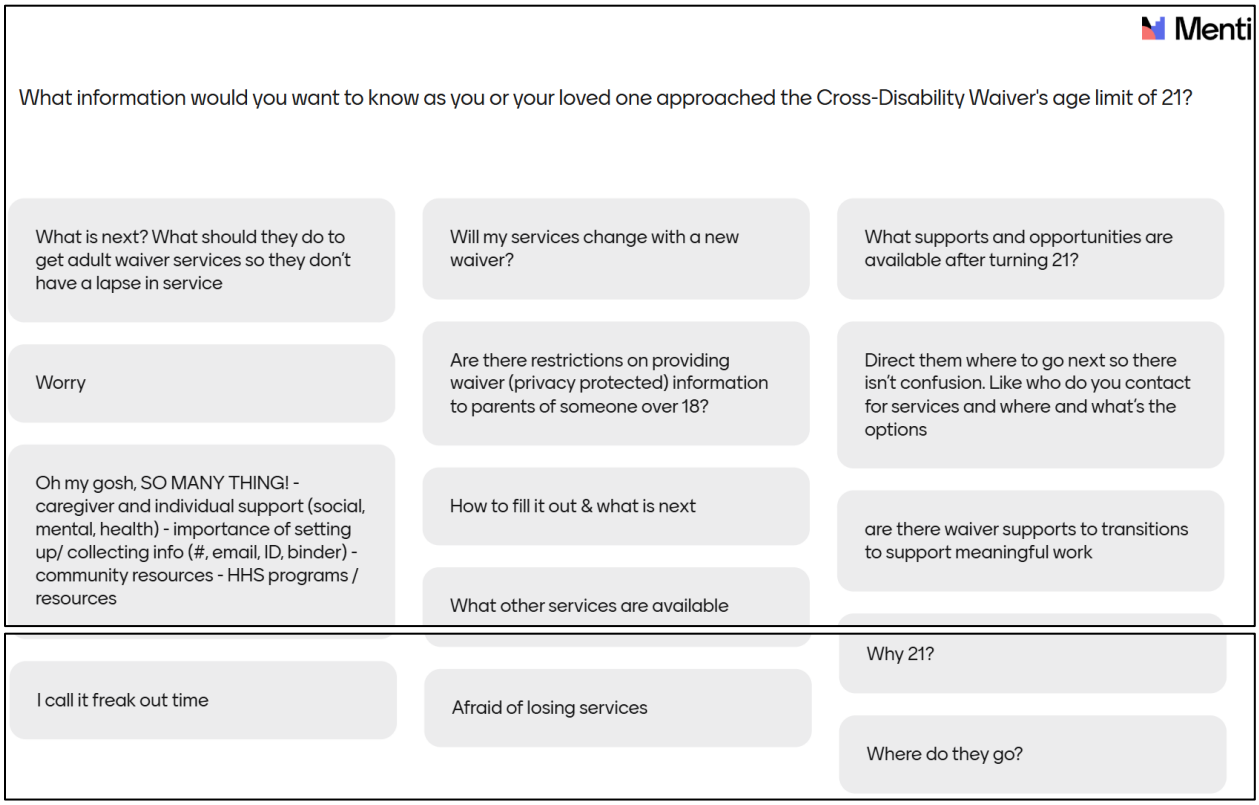
- Vote (Yes): Proposed Solution #2: Expand Waiver Access for Un(der)served Groups of Children
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

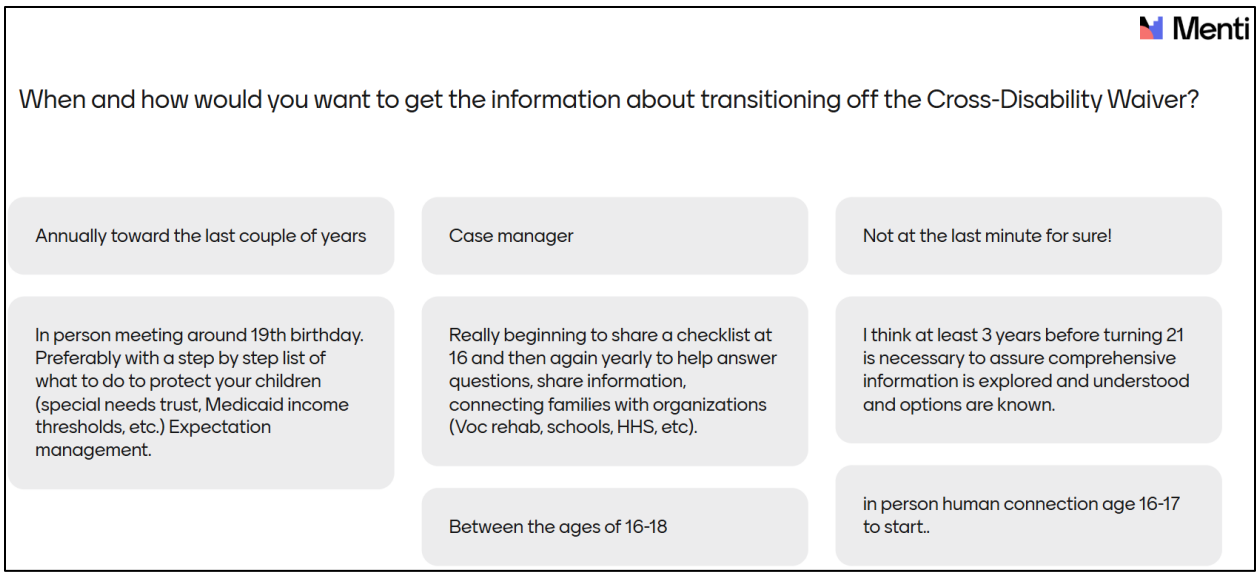
- Vote (Yes): Proposed Solution #3: Modernize Waiver Eligibility Tool
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

- Vote (Yes): Budget Considerations for CDAC's Recommendations
  - Darcy Andahl, Kirsten Dvorak, Kyle Erickson, Andrea Hansen, Kayla Johnson, Iman Moore, Katynka Morrissette, Jonathan O'Konek, Lorena Poppe, Danielle Robbins, Kendra Vander Wall
- Vote (No): none
- Motion carried

DEEP DIVE INTO THE CDW APPLICATION

- Members received an overview of the kinds of questions that are asked in certain appendices of the HCBS Waiver Application, and what information CMS is looking for from states in each. These included:
  - Appendix B – Participant Access and Eligibility
  - Appendix C – Participant Services
  - Appendix D – Participant-Centered Planning and Service Delivery
  - Appendix E – Participant Direction of Services
  - Appendix F – Participant Rights
  - Appendix G – Participant Safeguards
  - Appendix H – Quality Improvement Strategy
  - Appendix I – Financial Accountability
  - Appendix J – Performance Measures
- Members got to see how the topics they've covered in the last year were related to the appendices and which ones hadn't been covered as much before, like the ones on quality and costs.
- Members were asked some targeted questions that would help HHS continue to write certain sections of the Cross-Disability Waiver's (CDW) waiver application.
  - For example, members completed a Menti survey to share feedback about information they would want to get as their child approached the maximum age on the CDW:





PUBLIC COMMENT

- Public comment was opened at 3:30 p.m.

PUBLIC COMMENT 1

- Carlotta McCleary – Mental Health Advocacy Network



Consumer & Family Network
Mental Health America of ND
Youth Move Beyond
The Arc of Bismarck
Federation of Families for Children's Mental Health
Protection & Advocacy Project
ND Association of Community Providers
Fraser, Ltd.
Individual Consumers & Families

Cross-Disability Waiver Public Comments
October 15, 2026

Good afternoon, members of the North Dakota Cross-Disability Advisory Council. I am Carlotta McCleary, Executive Director of Mental Health America of North Dakota and Executive Director of the North Dakota Federation of Families for Children's Mental Health. Today I speak on behalf of the Mental Health Advocacy Network (MHAN). MHAN advocates for a consumer/family driven mental health system of care that provides an array of service choices that are timely, responsive, and effective. Our vision is for every North Dakotan to have access to the right service—whether it be preventative, treatment, or recovery; at the right time—when the service is needed; and at the right place—as near his or her home as possible. MHAN is supporting the establishment of a cross-disability waiver and requests that it be truly inclusive of children with mental health needs.

North Dakota is lacking a full continuum of care for children's mental health services in both the public and private sectors and across insurance policies. Families who have a child with a mental health challenge are expected to make tremendous sacrifices to get their child access to care. Specifically including children with mental health needs into the cross-disability waiver, without requiring that they first have another disability, will go a long way to address existing service gaps.

One out of ten children in North Dakota has a serious emotional disturbance (SED). That translates to over 18,000 children. These are children with a mental health issue that significantly impacts more than one major area of life and is expected to last at least one year and are at a high risk of out-of-home placement. These are children who are often in need of

intense, ongoing services that include wraparound case management, parent peer support, in-home supports, and respite for their families. The North Dakota Children's Cabinet traveled to each region of the state. All regions highlighted the need for wraparound case management. No families in North Dakota have access to wraparound case management. Without a waiver, families have no way of accessing wraparound case management.

Many families have insurance plans that neither cover many needed services, and if they do, many of those families are faced with paying high deductibles. Wraparound case management, in-home support, and respite are often not covered under existing insurance policies. Some common insurance plans are not deemed in network for most North Dakota mental health providers. This places significant financial barriers to access care for their children.

Children with mental health services do not have the same opportunities to receive services as children with developmental and intellectual disabilities. The services needed by families are in extremely short supply, if available at all. The regional Behavioral Health Clinics are the primary means by which families can gain access to intensive community mental health services and they are nowhere near able to meet the demand.

If families cannot receive services through the behavioral health clinics, the only real alternative is the 1915(i) Medicaid State Plan Amendment. Only 20 children received services in September 2026. What this means is that between the Behavioral Health Clinics and the 1915(i) there is a significant gap between the high demand for services from families and our current options for families to get those services, especially compared to populations served by North Dakota's existing waivers.

Mental Health Advocacy Network has three core recommendations:

1. Include mental health conditions as one of the qualifying conditions for the cross-disability waiver, without a pre-requisite of a developmental or intellectual disability.
2. Address the lengthy waits to get a disability diagnosis by allowing *diagnosable* conditions.
3. Services available to families raising children with mental health conditions should include wraparound case management, parent peer support, in-home supports, and respite for their families.

The cross-disability waiver should be truly representative of children with disabilities in North Dakota by including children with mental health diagnoses, the majority of which do not necessarily have a developmental or intellectual disability. It should also be considerate to the significant challenges families have in receiving evaluations by utilizing *diagnosable* conditions to qualify for the waiver.

This concludes my comments, and I will be happy to answer any questions you may have.

Carlotta McCleary
Mental Health Advocacy Network, Spokesperson
E-Mail: cmccleary@ndffcmh.com
Phone: (701) 222-3310

PUBLIC COMMENT 2

- Denise Harvey on behalf of Veronica Zietz – North Dakota Protection & Advocacy Project

Protection & Advocacy Project
400 E. Broadway, Suite 409
Bismarck, ND 58501
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TTY: 711
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October 15, 2026

Cross Disability Advisory Council
Attn: Kevin Miiller, Facilitator
kevin@itcbconsulting.com

Members of the Cross Disability Advisory Council,

The North Dakota Protection & Advocacy Project (ND P&A) is committed to advancing the human and legal rights of individuals with disabilities. P&A's mission is to champion the equality and inclusion of people with all types of disabilities in all aspects of life. Established in 1977 in response to a congressional mandate, P&A is charged with implementing several programs including the 1986 Protection and Advocacy for Individuals with Mental Illness Act. Following a national outcry at the exposure of the inhumane realities of institutional placement it was recognized that a federally directed system of legal advocacy was necessary to ensure the humane care, treatment, habilitation and protection of individuals with mental health disabilities.

Much of P&A's mental health case work falls into conducting investigations of abuse, neglect and exploitation; as well as education and community inclusion advocacy. Through this work we see first-hand the importance of quality mental health care and supports. When P&A becomes involved, situations are often escalated and the systems put in place to protect those most vulnerable have failed. This is especially apparent when it comes to the availability and affordability of mental health services for children with serious emotional disturbance (SED). A lack of affordable home and community based services results in children with SED being at higher risk of crisis and acute psychiatric placement. Institutional placement is the least effective and most expensive treatment option for children with SED, which is why I urged the Cross Disability Advisory Council (CDAC) to include children with SED in the Cross Disability Children's Waiver.

Beyond individual case work P&A collaborates with others to improve the systems that serve children with mental health disabilities. I'm a member of the Governor's Children's Cabinet and it's Children with Complex Needs Subcommittee. This Subcommittee was charged by ND's Legislative Assembly

to identify and address issues in serving complex children. Over the past year this Subcommittee has engaged with each of North Dakota's eight regions to identify the children who are most challenging to serve and to propose solutions to improve gaps in care. One major finding that came out of this work is that most often these complex children have a mental or behavioral disability. Additionally, professionals and those with lived experience identified a lack of services, affordability of services, and fragmented care coordination as major concerns for complex children. With this in mind I believe that including children with SED in Cross Disability Children's Waiver will be the first step in improving access to affordable mental health services and care coordination.

P&A is also a member of the Olmstead Commission established by executive order of the Governor to move the state towards greater integration and inclusion for individuals with disabilities with respect to community services and supports, health care, and more. The Olmstead Commission is uniquely situated to examine the State's investment in home and community based services in lieu of more restrictive settings. Again, through my experience with the Olmstead Commission I believe including children with SED in the Cross Disability Children's Waiver is aligned with the intent and work of the ND's stance on community integration and its implementation of ND's Olmstead plan.

I urge the CDAC to invest in North Dakota's children with SED by including them as eligible participants in the Cross Disability Children's Waiver. This will allow greater access to home and community based services for children with SED, who otherwise go without services, are institutionalized at great social and financial costs, and fail to thrive.

I appreciate your time and consideration; please contact me with any questions.

Sincerely,



Veronica Zietz
Executive Director

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ADJOURNMENT

- The meeting was adjourned at 4:07 p.m.