



**DELAWARE HEALTH
AND SOCIAL SERVICES**

Division of Medicaid & Medical Assistance

OFFICE OF THE DIRECTOR

July 6, 2022

Judith Cash, Director
State Demonstrations Group
Centers for Medicare & Medicaid Services
Centers for Medicaid and CHIP Services
Mail Stop: S2-26-06
7500 Security Boulevard
Baltimore, Maryland 21244-1850

The Delaware Division of Medicaid and Medical Assistance (DMMA) is pleased to submit for CMS approval the attached Section 1115 Waiver amendment to add the following new benefits under the DSHP Waiver and incorporate these benefits into the DSHP and DSHP Plus managed care models, effective January 1, 2023:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children;
- (2) Permanent coverage for a second home-delivered meal for members receiving home- and community-based services (HCBS) in DSHP Plus;
- (3) Coverage of a pediatric respite benefit as a American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan initiative;
- (4) Coverage of a self-directed option for parents on behalf of children receiving state plan personal care services; and
- (5) Coverage of Delaware's Nursing Home Transition Program (formerly Money Follows the Person Demonstration) under the DSHP 1115 waiver

DMMA looks forward to working with CMS towards an expedited review and approval of this amendment. If you have any questions, please contact me or Kimberly Xavier at 302-255-9576 or by email at Kimberly.Xavier@delaware.gov.

Please return the approved copy to:

Stephen M. Groff, Director
Division of Medicaid and Medical Assistance
Molly Magarik, Secretary, DHSS
Delaware Health and Social Services
P.O. Box 906
New Castle, DE. 19720-0906

Sincerely,

DocuSigned by:

164BC1A0F95D49B...

Stephen M. Groff Director
~Designee for Molly Magarik, Secretary, DHSS



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Medicaid & Medical Assistance

An Amendment to the Delaware
Diamond State Health Plan Section 1115 Demonstration Waiver

to

The Centers for Medicare & Medicaid Services
United States Department of Health and Human Services

State of Delaware

Stephen Groff, Director
Division of Medicaid & Medical Assistance (DMMA)

July 6, 2022

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Section I – Summary

The Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is requesting an amendment to the Delaware Diamond State Health Plan (DSHP) Section 1115 Demonstration Waiver to add the following new benefits under the DSHP Waiver and incorporate these benefits into the DSHP and DSHP Plus managed care models, effective January 1, 2023:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children;
- (2) Permanent coverage for a second home-delivered meal for members receiving home- and community-based services (HCBS) in DSHP Plus;
- (3) Coverage of a pediatric respite benefit as a American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan initiative;
- (4) Coverage of a self-directed option for parents on behalf of children receiving state plan personal care services; and
- (5) Coverage of Delaware’s Nursing Home Transition Program (formerly Money Follows the Person Demonstration) under the DSHP 1115 waiver.

Section II – Delaware DSHP Demonstration Amendment Purpose, Goals and Objectives

Delaware is requesting an amendment to the DSHP 1115 Waiver to add coverage of five new waiver services. These services support the DSHP 1115 Waiver’s goals of improving access to quality health care for individuals receiving Medicaid, increasing coordination of care and supports, rebalancing Delaware’s long-term care system in favor of home and community based services, and expanding consumer choices.

Delaware is adding these services to improve maternal and child health outcomes, address health disparities, implement our ARP Section 9817 HCBS spending plan, and improve supports for Delaware Medicaid beneficiaries and families who rely on home and community based services.

These services include:

(1) Evidence-based Home Visiting Models

There is growing evidence that increased stress from social factors such as food insecurity as well as poverty and social exclusion can have a major impact on health and can lead to premature death as well as poor birth outcomes for pregnant women and infants. As DMMA’s mission is to *“Improve health outcomes by ensuring that the*

highest quality medical services are provided to the vulnerable populations of Delaware in the most cost effective manner,” addressing social factors and ensuring our most vulnerable populations have health care coverage has become imperative to improving health outcomes.

DMMA is seeking to include access to home visiting to pregnant women and children through the Nurse Family Partnership (children up to the age of two) and Healthy Families Delaware (up through the child’s third birthday) evidenced-based home visiting programs. With this new benefit, DMMA seeks to begin to address racial disparities within the maternal health crisis. Studies show that Black women are three times more likely to die from a pregnancy related cause than white women.¹ This fact, along with evidence that levels of distrust in physicians tend to be higher for individuals of low socioeconomic status and within the Black community,² providing another trusted community based home visiting program can help promote use of health care services for women and children.

(2) HCBS Home-Delivered Meals

In response to the COVID-19 Public Health Emergency (PHE) and the increased risk of food insecurity in our Medicaid DSHP Plus members receiving HCBS, Delaware sought temporary authority through an Appendix K amendment to the DSHP 1115 waiver so that DSHP Plus HCBS members could receive a second home-delivered meal per day. This additional meal has been successful in supporting members to remain in their homes, contributed to Delaware’s goals of increasing supports for members needing LTSS and promoted early intervention for individuals with long-term care needs. DMMA is requesting authority in the DSHP 1115 Waiver to provide up to two home-delivered meals per day as part of the permanent DSHP Plus benefit package.

(3) Respite Benefit for Caregivers of Children and Young Adults

Children and families served by Delaware Medicaid face a myriad of challenges on a daily basis. Families with children with complex medical conditions (CMC), severe emotional disorders and dual diagnoses of MH/IDD face specific challenges in supporting their child within the family unit. Addressing parental and/or other caregiver needs is essential to helping to support these families.

¹ <https://www.cdc.gov/healthequity/features/maternal-mortality/index.html>

² Racial/Ethnic Differences in Physician Distrust in the United States; Katrian Armstrong, Karima L. Ravenell, Suzane McMurphy, Mary Putt; Am J Public Health. 2007 Jul; 97(7): 1283-1289

In response to a cross section of stakeholders who provided feedback during the ARP Section 9817 HCBS Spending Plan listening sessions, Delaware is proposing to add a Medicaid-funded respite service for caregivers of children with CMC, severe emotional disorders and dual diagnoses of behavioral health/IDD. HCBS Spending Plan funds will be used for the initial development and implementation of the service and will be integrated into the Medicaid baseline budget in order to sustain the service over time.

(4) Self-directed State Plan personal care/attendant care for children

In response to extensive feedback during Delaware’s HCBS Spending Plan listening sessions as well as during DMMA’s work with stakeholders, including parents of children with CMC, DMMA has identified the need to address gaps in care that parents and families are experiencing as a result of the direct service provider (DSP) workforce shortage. To address this shortage and empower families to identify and provide care that meets the needs of their children, DMMA is seeking authority to allow parents to self-direct the State Plan personal care (attendant care) services minor children receive today. This self-directed option will give families the flexibility to hire, for example, a neighbor, friend, or family member, including a legally responsible family member as the service provider, as long as the individual meets all employee qualifications as verified by the DSHP MCO. This option will also support the DSHP MCOs in maintaining appropriate and timely access to care.

(5) DSHP Plus Nursing Facility Transition Program

DMMA initially received federal funding for our Money Follows the Person program, Finding A Way Home, in 2007. Between 2007 and 2017, DMMA transitioned 271 individuals under MFP. In 2017, when MFP funding was exhausted, Finding A Way Home became an integral component of the nursing facility transition services under the DSHP managed long-term services and supports managed care organization (MCO) contracts. Although MFP no longer funded the transitions after 2017, these transitions have continued as DMMA and our partner MCOs sustained the MFP activities that worked well and used the lessons learned from MFP to improve upon policies for effective transitions. In CYs 2020-2021, DMMA and DSHP MCOs transitioned 230 individuals. This waiver amendment incorporates these services into the DSHP Plus waiver benefits.

Section III – Eligibility, Benefits, Cost-Sharing and Delivery System

Eligibility

Medicaid eligibility requirements will not differ from the approved Medicaid State Plan and approved DSHP 1115 demonstration. Delaware is not proposing changes to Medicaid eligibility standards in this amendment

Benefits

The benefits requested as part of this amendment will be in addition to those available under the state plan. This amendment adds:

- (1) Evidence-based Home Visiting Models** – Coverage of two models of evidenced-based home visiting for pregnant women and children under the age of two who meet enrollment criteria established by Nurse Family Partnership and Healthy Families of Delaware.
- (2) HCBS home-delivered meals** – Permanent coverage for up to two home-delivered meal for members receiving HCBS in DSHP Plus. Delaware currently covers this second meal under the DSHP 1115 Waiver Appendix K authority that will expire six months after the end of the COVID-19 PHE.
- (3) Respite Benefit for Caregivers of Children and Young Adults** – Coverage of a pediatric respite benefit as a Section 9817 HCBS Spending Plan initiative for individuals up to age 21 who are not receiving respite through DSHP Plus, PROMISE or the Lifespan 1915(c) waiver. This new pediatric respite benefit will be provided for children with a physical health or behavioral health condition, including children with Autism Spectrum Disorder or an intellectual disability, affecting their ability to care for themselves. Pediatric respite services will be furnished on a short-term basis to allow temporary relief from caretaking duties for the child’s primary unpaid caregiver, parent, court-appointed guardian, or foster parent. Respite services may be available up to 24 hours/7 days a week and include support in the home, after school, or at night, as well as transportation to and from school, medical appointments, or other community-based activities, or any combination of the above.

The following types of pediatric respite are available:

1. In-home unskilled respite – Provided in a child’s place of residence, home of respite provider, or home of a friend or family member for children with

unskilled care needs (i.e., supervision or assistance with ADLs and IADLs, supervision to assure health and welfare, or supervision of behavioral needs) who do not require services by a qualified licensed or certified provider. Services provided to children with behavioral health needs are provided by a trained paraprofessional who is supervised by a licensed clinician.

2. In-home skilled respite – Provided in a child’s place of residence or home of a friend or family member for children with ongoing skilled medical and behavioral health needs that can only be provided by a qualified licensed or certified provider such as an RN/LPN. (e.g., suctioning, G-tube feeding). No FFP is available for the cost of room and board.
3. Out of home respite – Skilled and unskilled support provided in a community setting or licensed facility, including but not limited to licensed child care setting, nursing facility, hospital, residential treatment facility, foster home, Prescribed Pediatric Extended Care (PPEC), and group home.
4. Emergency respite – A short-term service for children necessitated by an unplanned and unavoidable circumstance, such as a family emergency. Emergency respite can be provided in the home or in an out of home location. Prior approval is not required for emergency respite.

Benefit Limits and Assurances:

- Pediatric respite is limited to 15 days or 285 hours per waiver year. If additional respite is required, the child or the child’s representative may contact their MCO care coordinator to request additional hours based on medical necessity.
- Emergency respite is limited to 72 hours per episode, with a maximum of six-72 hour episodes per waiver year. Emergency respite is not included in the benefit limit.
- The child and/or child’s representative gives final approval of where the respite is provided.

- Respite services are not intended to supplant routine care, including before and after school care.
- The child and/or child’s representative gives final approval of where respite is provided, dependent on availability and consistent with the child’s level of care needs.
- Medicaid will not pay for respite provided for the purpose of oversight of additional minor children in the home.
- The cost of transportation is included in the rate paid to providers of these services.
- Federal financial participation is not available for the cost of room and board except when provided as part of services furnished in a facility approved by the State that is not a private residence.

Qualified pediatric respite providers include:

1. Individual Providers
 - At least 18 years of age
 - First aid
 - CPR certification
 - Training specific to address the child’s needs
 - Valid driver license (as needed)³
 - Criminal Background Check
2. Licensed/Certified Providers
 - RN
 - LPN
 - Board Certified Behavior Analyst
 - Board Certified Assistant Behavior Analyst
 - Registered Behavior Technician
3. Agencies/Facilities
 - Community Mental Health Agencies
 - Community Mental Health Facilities

³ Families may access NEMT if needed.

- Community Foster Care Agencies
- Home Health Agencies
- Licensed Residential Treatment Facilities
- Nursing Facilities
- Hospitals
- Home Health Agencies
- Camps
- Residential Care Facilities
- Child Care Centers
- Child Development Centers
- Group Homes
- Day Care Centers
- Licensed Foster Home
- Prescribed Pediatric Extended Care (PPEC)

(4) Self-directed personal care/attendant care for children – Authority for a self-direction option for parents on behalf of children up to age 21, receiving State Plan personal care services. Self-directed personal care/attendant care services for children includes assistance with ADLs (e.g. bathing, dressing, personal hygiene, transferring, toileting, skin care, eating and assisting with mobility). When specified in the service plan, this service includes assistance with instrumental activities of daily living (IADLs) (e.g. light housekeeping chores, shopping, meal preparation). Assistance with IADLs must be essential to the health and welfare of the participant based on the assessment of the Case Manager, provided to only the member and not for general utility within the household. A parent/guardian or other representative designated by the parent/guardian shall direct this service on behalf of the member.

In order to be eligible to receive self-directed personal care/attendant care services a child must have a chronic medical condition, IDD, or behavioral health condition which results in the need for assistance with age appropriate ADLs/IADLS.

Provider Qualifications

Members can hire a neighbor, friend, or family member including a legally responsible family member, who must meet all employee qualifications as verified by the managed care plan. Legally responsible family members who

provide self-directed personal care/attendant care services must designate another family member/representative to be responsible for directing care and signing time sheets. Legally responsible family members are limited to providing 40 hours of week of care.

Delaware will operate this benefit in accordance with the participant-direction requirements of the DSHP 1115 Waiver STC #29.

(5) DSHP Plus Nursing Facility Transition Services (formerly Money Follows the Person Demonstration Grant services)

Coverage of up to \$2500 in short-term nursing facility transition services to support a DSHP Plus member's transition from a nursing facility to an HCBS setting:

- Payment for securing a community-based home: DSHP Plus members may receive services for costs associated with securing a community-based home that are not coverable under Medicaid. These costs may include apartment application and administrative fees as well as HCBS goods and services essential for the transition.
- Payment for activities prior to transitioning from a nursing facility: DSHP Plus members may receive services and activities such as home accessibility modifications, vehicle adaptations, pre-tenancy supports, community transition services, and case management prior to an individual transitioning from a nursing facility setting.

The MCO case manager may authorize service request exceptions above the \$2500 limit.

Cost sharing

The cost sharing requirements under this Demonstration will not differ from those provided under the Medicaid State Plan. No cost sharing will be applied to the new Demonstration benefits.

Delivery System

All benefits added through this waiver amendment will be provided through the two DSHP managed care organizations (MCOs) that operate under the mandatory

managed care delivery system authorized under this DSHP 1115 Demonstration Waiver. No other changes to the current managed care and FFS delivery systems are being proposed in this amendment.

Section IV–Demonstration Hypothesis and Evaluation

The information below presents an overview of the preliminary plan to evaluate these new components of the DSHP 1115 Waiver. It is subject to change and will be further defined as the new services are implemented. The sample measures are not final and do not represent an exhaustive list of measures that could be used to test each hypothesis.

The Demonstration will test if:

- (1) The addition of two evidence-based home visiting models improve the health and wellbeing of the Medicaid participants. Delaware is in the process of defining the evaluation measures, which may include measures such as: Mother Child Depression Screening, post-partum visit, treatment for a behavioral health condition, and dental visit.
- (2) The provision of home-delivered meals and nursing facility transition services, as part of an HCBS benefit package, succeeds in supporting Delaware’s goals of improving access to health care by expanding access to HCBS and rebalancing Delaware’s long-term care system in favor of HCBS. Delaware intends to incorporate the addition of a second home delivered meal into the current Evaluation design that assesses whether the provision of meals, as part of a package of HCBS services, succeeds in supporting Delaware’s waiver goals. Delaware will also add a measure related to the percentage of reinstitutionalizations lasting more than 30 days and work with CMS to align DSHP 1115 waiver measures with MFP.
- (3) The provision of a respite benefit for caregivers reduces informal caregiver burnout and increases family/caregiver satisfaction with the program. These items will be measured through the administration of family/caregiver survey that will be included as part of the current Evaluation design.
- (4) Providing a self-directed option for children receiving Medicaid State Plan personal care (attendant care) increases family satisfaction with this Medicaid benefit and expands the DSP workforce. Family satisfaction will be measured through the administration of family/caregiver survey that will be included as part of the current Evaluation design. Additionally, the State will add a measure

related to the percentage increase in DSP network participation because of this option.

Delaware intends to update its Evaluation Design, per Section XVII of the DSHP 1115 Demonstration Waiver STCs, to incorporate the additional benefits included in this amendment.

Section V – Estimate of Proposed Annual Enrollment and Annual Aggregate Expenditures

This amendment is not expected to increase or decrease annual enrollment in the DSHP 1115 Waiver. DSHP Waiver annual enrollment for 2021 included 278,147 enrollees. Enrollment projections for 2022 and 2023 are being refined as DMMA has more information about the end date of the COVID-19 PHE and CMS policies on “unwinding” once the Medicaid continuous coverage requirements end.

This waiver amendment is expected to increase annual, aggregate expenditures in CY 2023, the final year of the current demonstration approval, by \$14.5 million.

Section VI – List of Proposed Waivers and Expenditure Authorities

Waiver Authorities:

Delaware is requesting to extend the following current DSHP 1115 waiver authorities and add one new waiver authority in order to add the five benefits in this waiver amendment:

- **Amount, Duration, and Scope of Services Section 1902(a)(10)(B) and 1902(a)(17)** To the extent necessary to enable Delaware to offer a different benefit package to DSHP and DSHP-Plus participants than is being offered to the traditional Medicaid population.
- **Freedom of Choice Section 1902(a)(23)(A)** To the extent necessary to enable Delaware to restrict freedom-of-choice of provider through the use of mandatory enrollment into managed care plans for DSHP and DSHP- Plus participants.
- ***Self-Direction of Care Section 1902(a)(32)** To the extent necessary to enable the state to permit parents (on behalf of children up to age 21) to self-direct state plan personal care services. (*New)

Expenditure Authorities

Delaware is requesting new expenditure authority as follows:

- **Home visiting for Medicaid eligible pregnant women and children under the age of three.** Expenditures to provide evidenced-based home visiting to Medicaid eligible pregnant women and children as described in the STCs.
- **Self-directed personal care/attendant care for children.** Expenditures to provide self-directed personal care/attendant care for children receiving state plan personal care services.
- **Nursing facility transition services.** Expenditures to provide coverage of short-term nursing facility transition services to support a DSHP Plus member's transition from a nursing facility to an HCBS setting.

Delaware is requesting to extend the following current expenditure authorities for addition of the second HCBS meal and pediatric respite benefit:

- **HCBS for Medicaid State Plan Eligibles.** Expenditures to provide HCBS not included in the Medicaid State Plan to individuals who are eligible for Medicaid as described in the STCs.

Section VII – Public Notice (May 13, 2022 through June 15, 2022)

DMMA published a notice of public comment on its intent to amend the DSHP 1115 waiver in the Delaware News Journal and the Delaware State News on May 13, 2022. The public notice, a copy of the draft amendment, and a copy of the current approved waiver were posted on the DHSS/DMMA website (<https://dhss.delaware.gov/dhss/dmma/medicaid.html>) and hardcopies were made available upon request via email to DMMA_PublicHearing@delaware.gov. DMMA also used an electronic mailing list to notify the public.

Comments on the amendment were accepted the following ways:

By email: DMMA_PublicHearing@delaware.gov

By fax: 302-255-4481 to the attention of Kimberly Xavier

By mail:

1115 Demonstration Waiver Amendment
Division of Medicaid and Medical Assistance
Planning and Policy Unit
1901 North DuPont Highway P.O. Box 906
New Castle, Delaware 19720-0906

DMMA held two public meetings with opportunity for public comment, as listed below:

1. New Castle County – DMMA Medical Care Advisory Committee Meeting

May 18, 2022

9:00am – 11:00am

Via Zoom:

<https://zoom.us/j/99696774582?pwd=SDJCCgVamx3Sy9jMkRiNXpJaStNdz09>

Meeting ID: 996 9677 4582

Passcode: 080737

2. Kent County

In-person and virtual meeting

May 24, 2022

2:00pm – 3:30pm

Edgehill Shopping Center

Large Conference Room

43 S. Dupont Hwy

Dover, DE 19901

Via Zoom:

<https://us06web.zoom.us/j/87837587571>

Meeting ID: 878 3758 7571

Passcode: 381804

Summary of Public Comments:

Public comments were very supportive of these waiver proposals. Several commenters expressed appreciation for the proposals, especially the self-directed personal care/attendant care option for children and the second home-delivered meal. DMMA greatly appreciates the feedback and support for these Medicaid initiatives.

One commenter noted that the proposed pediatric respite definition may inadvertently exclude some children with Autism Spectrum Disorder (ASD) and the clinical and licensed professionals who support these children. DMMA considered this feedback and modified the final pediatric respite service definition and provider qualifications to be more inclusive of children with ASD.

Another commenter noted that the Healthy Families Delaware home visiting model serves children through their third birthday. DMMA has updated the waiver application to reflect this age.

Other commenters encouraged DMMA to allow payment for personal care attendants for the purpose of supporting DSHP 1115 waiver participants in an acute care settings when necessary supports are not available in that setting. Although DMMA has not added this proposal to the waiver amendment, DMMA is exploring the option to submit a DSHP 1115 Appendix K request for this payment that would extend up to six-months after the PHE. DMMA is also reviewing longer-term policy and payment options.

Finally, commenters raised the issue of reimbursement rates for direct service providers, which is beyond the scope of this waiver amendment. DMMA continues to look at strategies and opportunities to address access to HCBS services, including funding initiatives under the American Rescue Plan Act Section 9817 HCBS Spending Plan.

Section VIII – Demonstration Administration

Name and Title: Kimberly Xavier, Chief of Policy and Planning, DMMA

Telephone Number: (302) 255-9576

Email Address: Kimberly.Xavier@delaware.gov

Section IX – Demonstration Public Notice Documentation

- A. May 13, 2022 Publication in Delaware News Journal
- B. May 13, 2022 Publication in Delaware State News
- C. May 13, 2022 Waiver Amendment Public Notice posted to website
- D. May 1, 2022 Register Notice

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022



Classified Ad Receipt (For Info Only - NOT A BILL)

Customer: DIVISION OF MEDICAID
Address: JANE E. MITCHELL BLDG
NEW CASTLE DE 19720
USA

Ad No.: 0005253778
Pymt Method: Invoice
Net Amt: \$876.30

Run Times: 1

No. of Affidavits: 1

Run Dates: 05/13/22

Text of Ad:

**State of Delaware
Public Notice
Delaware Health and Social Services
Delaware Diamond State Health Plan
1115 Demonstration Waiver Amendment Request**

Purpose

Pursuant to the Special Terms and Conditions of Delaware's approved Medicaid demonstration waiver, the Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is required to submit a public notice consistent with 42 C.F.R 431.408 of its intent to submit a Section 1115 Waiver amendment to the Centers for Medicare & Medicaid Services (CMS). DMMA is requesting an amendment to the Diamond State Health Plan (DSHP) 1115 Demonstration Waiver to add coverage of five Medicaid services. The objectives of this waiver amendment are to improve maternal and child health, to support Delaware Medicaid beneficiaries and families who rely on home and community based services (HCBS), and to continue rebalancing Delaware's Medicaid long-term care system in favor of home and community based services.

Proposed Amendment: Summary of Proposed 1115 DSHP Waiver Amendment

The DMMA is requesting an amendment to the DSHP 1115 Demonstration Waiver to add the following benefits under the Waiver and incorporate these benefits into the DSHP and DSHP Plus managed care models, effective January 1, 2023:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children under the age of two who meet enrollment criteria established by the Nurse Family Partnership and Healthy Families of Delaware.
- (2) Permanent coverage of a second home-delivered meal for members receiving HCBS in DSHP Plus. Delaware currently covers a second meal under temporary authority from CMS that will expire six months after the end of the COVID-19 public health emergency.
- (3) Coverage of a pediatric respite benefit as an American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan initiative. Respite will be provided for children and young adults up to age 21 who are not receiving respite through DSHP Plus, PROMISE or the Lifespan Waiver. This new pediatric respite benefit will be provided for children with a physical health or behavioral health condition affecting their ability to care for themselves and will be furnished on a short-term basis to allow temporary relief from caretaking duties for the child's primary unpaid caregiver, parent, court-appointed guardian, or foster parent.
- (4) Coverage of a self-directed option for parents on behalf of children receiving state plan personal care services. In response to the needs of Delaware families, including parents and guardians serving children with complex medical conditions, DMMA is seeking authority to give parents/guardians the option to self-direct the Medicaid State Plan personal care (attendant care) received by their child or young adult up to age 21. This self-directed option will give families the flexibility to hire, for example, a neighbor, friend, or family member, including a legally responsible family member as the service provider, as long as the individual meets all employee qualifications as verified by the DSHP MCO.
- (5) Coverage of Delaware's Nursing Home Transition Program (formerly Money Follows the Person Demonstration) under the DSHP 1115 waiver. These services, including one-time payment of up to \$2500 for securing a community-based home and purchasing HCBS goods and services essential for the transition, will support a DSHP Plus member's transition from a nursing facility to an HCBS setting.

Public Comment Submission Process

As required by 42 CFR 431.408, DMMA must provide opportunity for a 30-day public comment period on the proposed DSHP 1115 Waiver amendment. The public is invited to review and comment on the proposed DSHP 1115 Waiver amendment as of the date of publication of this public notice. Comments must be received by 4:30pm on June 15, 2022. This deadline has been extended from June 10, 2022.

This public notice, a copy of the draft waiver amendment, and a copy of the current approved waiver will be posted on the DMMA website beginning May 13, 2022 at: <http://dhss.delaware.gov/dhss/dmma/medicaid.html>

Comments on the amendment may be submitted the following ways:

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

By email: DMMA_PublicHearing@delaware.gov
By fax: 302-255-4481 to the attention of Kimberly Xavier
By mail:
1115 Demonstration Waiver Amendment
Division of Medicaid and Medical Assistance
Planning and Policy Unit
1901 North DuPont Highway P.O. Box 906
New Castle, Delaware 19720-0906

The hardcopy waiver amendment will be available by request via email at: DMMA_PublicHearing@delaware.gov
(Please identify in the subject line: 1115 Demonstration Waiver Amendment)

Public Comment Meetings:

DMMA will hold two public meetings with opportunity for public comment, as listed below:

1. New Castle County

Virtual Meeting
May 18, 2022
9:00am – 11:00am

Via Zoom:
<https://zoom.us/j/99696774582?pwd=SDJCcGpVamx3Sy9jMkRiNXpJaStNdz09> Meeting ID: 996 9677 4582
Passcode: 080737

2. Kent County

In-person and virtual meeting
May 24, 2022
2:00pm – 3:30pm
Edgehill Shopping Center
Large Conference Room
43 S. Dupont Hwy
Dover, DE 19901

Via Zoom:
<https://us06web.zoom.us/j/87837587571>
Meeting ID: 878 3758 7571
Passcode: 381804

Any public feedback received will be summarized including any changes that will be made as a result of the public comments on the DSHP 1115 Waiver amendment.

If you require special assistance and/or services to participate in the public meeting (e.g., sign language interpretation or other translation services, etc.), please call or e-mail the following contact at least ten (10) days in advance (when possible) prior to the meeting for arrangements:
Maxine Jacobs (302) 255-9651; sarahmaxine.jacobs@delaware.gov
The prompt submission of requests helps to ensure the availability of qualified individuals and appropriate accommodations in advance.

Stephen M. Groff
Director
Division of Medicaid and Medical Assistance
5/13-NJ

Date 5/9/2022

0005253778-01

 **INDEPENDENT NEWSMEDIA INC. USA**

110 Galaxy Drive • Dover, DE • 19901 • 1-800-282-8586

State of Delaware:

County of Kent:

Before me, a Notary Public, for the County and State aforesaid. Darel LaPrade, known to me to be such, who being sworn according to law deposed and says that he is the Publisher of **Delaware State News**, a daily newspaper published at Dover, County of Kent, and State of Delaware, and that the notice, a copy of which is hereto attached, as published in the **Delaware State News** in its issue of 05/13/22.



Publisher
Independent Newsmedia Inc. USA

Sworn to and subscribed before me this 13th Day of May, A.D., 2022





Notary Public

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

**State of Delaware
Public Notice
Delaware Health and Social Services
Delaware Diamond State Health Plan
1115 Demonstration Waiver Amendment Request**

Purpose

Pursuant to the Special Terms and Conditions of Delaware's approved Medicaid demonstration waiver, the Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is required to submit a public notice consistent with 42 C.F.R 431.408 of its intent to submit a Section 1115 Waiver amendment to the Centers for Medicare & Medicaid Services (CMS). DMMA is requesting an amendment to the Diamond State Health Plan (DSHP) 1115 Demonstration Waiver to add coverage of five Medicaid services. The objectives of this waiver amendment are to improve maternal and child health, to support Delaware Medicaid beneficiaries and families who rely on home and community based services (HCBS), and to continue rebalancing Delaware's Medicaid long-term care system in favor of home and community based services.

Proposed Amendment: Summary of Proposed 1115 DSHP Waiver Amendment

The DMMA is requesting an amendment to the DSHP 1115 Demonstration Waiver to add the following benefits under the Waiver and incorporate these benefits into the DSHP and DSHP Plus managed care models, effective January 1, 2023:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children under the age of two who meet enrollment criteria established by the Nurse Family Partnership and Healthy Families of Delaware.
- (2) Permanent coverage of a second home-delivered meal for members receiving HCBS in DSHP Plus. Delaware currently covers a second meal under temporary authority from CMS that will expire six months after the end of the COVID-19 public health emergency.
- (3) Coverage of a pediatric respite benefit as an American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan initiative. Respite will be provided for children and young adults up to age 21 who are not receiving respite through DSHP Plus, PROMISE or the Lifespan Waiver. This new pediatric respite benefit will be provided for children with physical health or behavioral health condition affecting their ability to care for themselves and will be furnished on a short-term basis to allow temporary relief from caretaking duties for the child's primary unpaid caregiver, parent, court-appointed guardian, or foster parent.
- (4) Coverage of a self-directed option for parents on behalf of children receiving state plan personal care services. In response to the needs of Delaware families, including parents and guardians serving children with complex medical conditions, DMMA is seeking authority to give parents/guardians the option to self-direct the Medicaid State Plan personal care (attendant care) received by their child or young adult up to age 21. This self-directed option will give families the flexibility to hire, for example, a neighbor, friend, or family member, including a legally responsible family member as the service provider, as long as the individual meets all employee qualifications as verified by the DSHP MCO.
- (5) Coverage of Delaware's Nursing Home Transition Program (formerly Money Follows the Person Demonstration) under the DSHP 1115 waiver. These services, including one-time payment of up to \$2500 for securing a community-based home and purchasing HCBS goods and services essential for the transition, will support a DSHP Plus member's transition from a nursing facility to an HCBS setting.

Public Comment Submission Process

As required by 42 CFR 431.408, DMMA must provide opportunity for a 30-day public comment period on the proposed DSHP 1115 Waiver amendment. The public is invited to review and comment on the proposed DSHP 1115 Waiver amendment as of the date of publication of this public notice. Comments must be received by 4:30pm on June 15, 2022. This deadline has been extended from June 10, 2022.

This public notice, a copy of the draft waiver amendment, and a copy of the current approved waiver will be posted on the DMMA website beginning May 13, 2022 at: <http://dhss.delaware.gov/dhss/dmma/medicaid.html>

Comments on the amendment may be submitted the following ways:

By email: DMMA_PublicHearing@delaware.gov

By fax: 302-255-4481 to the attention of Kimberly Xavier

By mail:

1115 Demonstration Waiver Amendment
Division of Medicaid and Medical Assistance
Planning and Policy Unit
1901 North DuPont Highway P.O. Box 906
New Castle, Delaware 19720-0906

The hardcopy waiver amendment will be available by request via email at: DMMA_PublicHearing@delaware.gov (Please identify in the subject line: 1115 Demonstration Waiver Amendment)

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

The hardcopy waiver amendment will be available by request via email at: DMMA_PublicHearing@delaware.gov (Please identify in the subject line: 1115 Demonstration Waiver Amendment)

Public Comment Meetings:

DMMA will hold two public meetings with opportunity for public comment, as listed below:

1. New Castle County

Virtual Meeting

May 18, 2022

9:00am – 11:00am

Via Zoom:

<https://zoom.us/j/99696774582?pwd=SDJCCGpVamx3Sy9jMkRiNXpJaStNdz09>

Meeting ID: 996 9677 4582

Passcode: 080737

2. Kent County

In-person and virtual meeting

May 24, 2022

2:00pm – 3:30pm

Edgehill Shopping Center

Large Conference Room

43 S. Dupont Hwy

Dover, DE 19901

Via Zoom:

<https://us06web.zoom.us/j/87837587571>

Meeting ID: 878 3758 7571

Passcode: 381804

Any public feedback received will be summarized including any changes that will be made as a result of the public comments on the DSHP 1115 Waiver amendment.

If you require special assistance and/or services to participate in the public meeting (e.g., sign language interpretation or other translation services, etc.), please call or e-mail the following contact at least ten (10) days in advance (when possible) prior to the meeting for arrangements:

Maxine Jacobs (302) 255-9651; sarahmaxine.jacobs@delaware.gov

The prompt submission of requests helps to ensure the availability of qualified individuals and appropriate accommodations in advance.

Stephen M. Groff
Director
Division of Medicaid and Medical Assistance
538422 DSN 5/13/2022



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Medicaid & Medical Assistance

**State of Delaware
Public Notice
Delaware Health and Social Services**

**Delaware Diamond State Health Plan
1115 Demonstration Waiver Amendment Request**

Purpose

Pursuant to the Special Terms and Conditions of Delaware's approved Medicaid demonstration waiver, the Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is required to submit a public notice consistent with 42 C.F.R 431.408 of its intent to submit a Section 1115 Waiver amendment to the Centers for Medicare & Medicaid Services (CMS). DMMA is requesting an amendment to the Diamond State Health Plan (DSHP) 1115 Demonstration Waiver to add coverage of five Medicaid services. The objectives of this waiver amendment are to improve maternal and child health, to support Delaware Medicaid beneficiaries and families who rely on home and community based services (HCBS), and to continue rebalancing Delaware's Medicaid long-term care system in favor of home and community based services.

Proposed Amendment: Summary of Proposed 1115 DSHP Waiver Amendment

The DMMA is requesting an amendment to the DSHP 1115 Demonstration Waiver to add the following benefits under the Waiver and incorporate these benefits into the DSHP and DSHP Plus managed care models, effective January 1, 2023:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children under the age of two who meet enrollment criteria established by the Nurse Family Partnership and Healthy Families of Delaware.
- (2) Permanent coverage of a second home-delivered meal for members receiving HCBS in DSHP Plus. Delaware currently covers a second meal under temporary authority from CMS that will expire six months after the end of the COVID-19 public health emergency.

- (3) Coverage of a pediatric respite benefit as an American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan initiative. Respite will be provided for children and young adults up to age 21 who are not receiving respite through DSHP Plus, PROMISE or the Lifespan Waiver. This new pediatric respite benefit will be provided for children with a physical health or behavioral health condition affecting their ability to care for themselves and will be furnished on a short-term basis to allow temporary relief from caretaking duties for the child's primary unpaid caregiver, parent, court-appointed guardian, or foster parent.
- (4) Coverage of a self-directed option for parents on behalf of children receiving state plan personal care services. In response to the needs of Delaware families, including parents and guardians serving children with complex medical conditions, DMMA is seeking authority to give parents/guardians the option to self-direct the Medicaid State Plan personal care (attendant care) received by their child or young adult up to age 21. This self-directed option will give families the flexibility to hire, for example, a neighbor, friend, or family member, including a legally responsible family member as the service provider, as long as the individual meets all employee qualifications as verified by the DSHP MCO.
- (5) Coverage of Delaware's Nursing Home Transition Program (formerly Money Follows the Person Demonstration) under the DSHP 1115 waiver. These services, including one-time payment of up to \$2500 for securing a community-based home and purchasing HCBS goods and services essential for the transition, will support a DSHP Plus member's transition from a nursing facility to an HCBS setting.

Public Comment Submission Process

As required by 42 CFR 431.408, DMMA must provide opportunity for a 30-day public comment period on the proposed DSHP 1115 Waiver amendment. The public is invited to review and comment on the proposed DSHP 1115 Waiver amendment as of the date of publication of this public notice. Comments must be received by 4:30pm on June 15, 2022. This deadline has been extended from June 10, 2022.

This public notice, a copy of the draft waiver amendment, and a copy of the current approved waiver will be posted on the DMMA website beginning May 13, 2022 at: <http://dhss.delaware.gov/dhss/dmma/medicaid.html>

Comments on the amendment may be submitted the following ways:

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By fax: 302-255-4481 to the attention of Kimberly Xavier

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

By mail:

1115 Demonstration Waiver Amendment
Division of Medicaid and Medical Assistance
Planning and Policy Unit
1901 North DuPont Highway P.O. Box 906
New Castle, Delaware 19720-0906

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Demonstration Waiver Amendment)

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Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

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Maxine Jacobs (302) 255-9651; sarahmaxine.jacobs@delaware.gov

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Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022



DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID AND MEDICAL ASSISTANCE
Statutory Authority: 31 Delaware Code, Section 512 (31 Del.C. §512)

GENERAL NOTICE

NOTICE

Delaware Diamond State Health Plan 1115 Demonstration Waiver Amendment

In accordance with the public notice requirements of 42 CFR 441.304 (d1)(e) and (f) and the *state* public notice requirements of Title 29, Chapter 101 of the **Delaware Code**, Delaware Health and Social Services (DHSS)/Division of Medicaid and Medical Assistance (DMMA) gives notice of its intent to file an application with the Centers for Medicare and Medicaid Services (CMS) to amend Delaware's Section 1115 Diamond State Health Plan (DSHP) Demonstration Waiver to add four additional Medicaid benefits and incorporate these benefits into managed care by January 1, 2023.

Purpose

The purpose of this posting is to provide public notice and receive public input for consideration regarding Delaware's Diamond State Health Plan (DSHP) 1115 Waiver amendment, which will add, effective January 1, 2023, four additional Medicaid services under the authority of the DSHP 1115 Waiver and incorporate these services into the DSHP and DSHP Plus managed care delivery system. These new services include:

- (1) Coverage of two models of evidenced-based home visiting for pregnant women and children;
- (2) Permanent coverage for a second home-delivered meal for members receiving home- and community-based services (HCBS) in DSHP Plus;
- (3) Coverage of a pediatric respite benefit as an American Rescue Plan Act (ARP) Section 9817 Medicaid HCBS Spending Plan initiative; and
- (4) Adding a self-directed option for parents on behalf of certain children and young adults receiving State Plan personal care services.

DSHP 1115 Waiver Program: Waiver Amendment Description, Goals and Objectives

The Delaware DHSS/DMMA is requesting an amendment to the DSHP 1115 Waiver to include these four new waiver services identified in response to Delaware's efforts to improve maternal child health and to support Delaware Medicaid beneficiaries and families who rely on home and community based services. The following is a summary description of these new benefits:

- (1) **Evidence-based Home Visiting Models** - To improve maternal and child health outcomes, Delaware Medicaid is proposing to add coverage of two models of evidenced-based home visiting for pregnant women and children under the age of two who meet enrollment criteria established by Nurse Family Partnership and Healthy Families of Delaware.
- (2) **HCBS home-delivered meals** - To address the risk of food insecurity among DSHP Plus members who rely on home and community based services, Delaware Medicaid is seeking permanent authority from CMS for coverage of up to two home-delivered meals. Delaware currently covers this second meal under temporary authority from CMS that will expire six months after the end of the COVID-19 public health emergency.
- (3) **Pediatric respite** - In response to the needs of Delaware families, Medicaid is proposing to add coverage of a pediatric respite benefit. This benefit will be funded initially as an initiative under the American Rescue Plan Act (ARP) Section 9817 HCBS Spending Plan authority. Respite will be provided for children and young adults up to age 21 who are not receiving respite through DSHP Plus, PROMISE or the Lifespan Waiver. This new pediatric respite benefit will be provided for children with a physical health or behavioral health condition affecting their ability to care for themselves and will be furnished on a short-term basis to allow temporary relief from caretaking duties for the child's primary unpaid caregiver, parent, court-appointed guardian, or foster parent.
- (4) **Self-directed personal care/attendant care for children** - In response to the needs of Delaware families, including parents and guardians serving children with complex medical conditions, Medicaid is seeking authority to give parents/guardians the option to self-direct the Medicaid State Plan personal care (attendant care) received by their child or young adult up to age 21. This self-directed option will give families the flexibility to hire, for example, a neighbor, friend, or family member, including a legally responsible family member as the service provider, as long as the individual meets all employee qualifications as verified by the DSHP MCO.

This 1115 waiver amendment will enable Delaware to improve health outcomes for pregnant women and young children, to

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

address food insecurity among seniors and individuals with disabilities who rely on home and community based services, and to expand access to respite and personal care services for families caring for children and young adults.

Public Comment Submission Process

As required by 42 CFR Part 441.304, DHSS/DMMA must establish and use a public input process for any changes in the services or operation of the waiver and the state public notice requirements of Title 29, Chapter 101 of the **Delaware Code**, DHSS/DMMA is providing an open comment period to allow all stakeholders an opportunity to provide input on the proposed regulation. Comments must be received by 4:30 p.m. on June 10, 2022.

Individuals may submit written comments using one or all of the following methods:

By email: DMMA_PublicHearing@delaware.gov

(Please identify in the subject line: *1115 Demonstration Waiver Amendment*)

By fax: 302-255-4481 to the attention of Kimberly Xavier

By written comment:

1115 Demonstration Waiver Amendment
Division of Medicaid and Medical Assistance
Planning, Policy & Quality Unit
1901 North DuPont Highway
P.O. Box 906
New Castle, Delaware 19720-0906

An electronic copy of waiver amendment can be found at:

<http://dhss.delaware.gov/dhss/dmma/medicaid.html>

The hardcopy waiver amendment will be available by request via email: DMMA_PublicHearing@delaware.gov

(Please identify in the subject line: *1115 Demonstration Waiver Amendment*)

Public Meetings

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+13017158592 99696774582#

Kent County

May 24, 2022

2:00 pm- 3:30 pm

Edgehill Shopping Center

Large Conference Room

43 S. DuPont Hwy.

Dover, DE 19901

***If you would prefer to participate virtually:**

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<https://us06web.zoom.us/j/87837587571>

Meeting ID: 878 3758 7571

Passcode: 381804

One tap mobile

+13017158592,,87837587571# US (Washington DC)

+13126266799,,87837587571# US (Chicago)

Delaware Diamond State Health Plan 1115 Waiver Amendment – July 2022

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/s/ Stephen M. Groff
Director
Division of Medicaid and Medical Assistance
25 DE Reg. 1035 (05/01/22) (Gen. Notice)

Date 4/12/2022 | 9:34 AM EDT