

# HOME Waivers: Public Comment Informational Session

Monday, January 5, 12:00–1:00 PM CT

Tuesday, January 6, 4:00–5:00 PM CT

Thursday, January 8, 5:00–6:00 PM CT



Health and  
Human Services



# Welcome

- ▶ The purpose of today's session is to present an overview of the HOME project, describe important updates underway and explain the public comment period for the Children and Youth and Adults with Disabilities waivers.
- ▶ Iowa HHS is holding three (3) public comment informational sessions:
  - January 5, 12:00–1:00 PM CT
  - January 6, 4:00–5:00 PM CT
  - January 8, 5:00–6:00 PM CT

# Topics

- ▶ What is the HOME project?
- ▶ What is public comment?
- ▶ What is the timeline for HOME?
- ▶ What are the major HOME updates underway and upcoming?
- ▶ Moving to the HOME waivers
- ▶ Where to find more information?
- ▶ Feedback and questions

# What is the HOME project?



# Hope and Opportunity in Many Environments (HOME) Project

Iowa HHS is committed to improving its Medicaid home and community-based services (HCBS) waiver system to improve the lives of Iowans who receive services.

The goals of HOME are to enhance services, support people to remain in their communities with their loved ones and make it easier for people to access the supports they need.

The proposed waivers would serve members across the lifespan and in the living situation that works best for them and their families.

# Stakeholder Engagement

2022	2023	2024	2025
<ul style="list-style-type: none"><li>• Conducted an evaluation of Iowa's community-based services system</li></ul>	<ul style="list-style-type: none"><li>• Formed a steering committee to inform HOME</li><li>• Surveyed over 600 Medicaid members, caregivers, providers and case managers</li><li>• Held 14 HOMEtown Conversations with over 1,000 Iowans</li></ul>	<ul style="list-style-type: none"><li>• Created an informational document called a concept paper and held listening sessions</li><li>• Surveyed over 3,000 Iowans using the Needs on Waitlist (NOW) Survey</li><li>• Conducted a Statewide Access and Provider Capacity Assessment</li></ul>	<ul style="list-style-type: none"><li>• Held workgroups with Managed Care Organizations (MCO) and HCBS providers</li></ul>

# Findings about the current HCBS system

Challenges	Recommendations
Services do not align with people's needs	<ul style="list-style-type: none"><li>• Transition to a waiver system that is needs-based, person-centered and equitable</li><li>• Expand service offerings to address the whole person</li><li>• Use My Service Plan Limits to meet each person's needs and make sure waiver funds are used efficiently</li></ul>
It is not easy to find and access services and supports	<ul style="list-style-type: none"><li>• Develop a system that is easier to understand and navigate</li></ul>

# What is public comment and why does it matter?



# What is the public comment period and why does it matter?

## ► What is a public comment period?

- Iowa HHS operates HCBS using Medicaid waivers. The federal Centers for Medicare & Medicaid Services (CMS) requires states to have a public comment period for waiver changes.
- A public comment period is a set amount of time when anyone can share their feedback on a proposed change before it's finalized.
- This process makes sure the people who might use the services, and their families and communities, get a chance to share their thoughts and concerns.

# How does the public comment period work?

**Step 1: Iowa HHS puts the new waiver application documents online and notifies Iowans. For this public comment period, you will have about five weeks to review the waivers and comment.**

- ▶ Information about the Children and Youth (CY) and Adults with Disabilities (AD) waivers and public notice are available at the following link: <https://hhs.iowa.gov/newsroom/public-notice>. Paper copies will be made available for review at the HHS Field Offices.
- ▶ Quick guides of the proposed waiver changes are posted on the HHS website.

**Step 2: You can submit feedback by mail or email.**

- ▶ Written comments may be addressed to Long Term Services and Supports Bureau, Department of Health and Human Services, Iowa Medicaid, 321 East 12th St., Des Moines, IA 50319-0114. Comments may also be sent via electronic mail to: [HCBS\\_Public\\_Comment@hhs.iowa.gov](mailto:HCBS_Public_Comment@hhs.iowa.gov)
- ▶ **All comments must be received by: February 13th, 2026, at 11:59pm CT.**

**Step 3: Once the public comment period ends, Iowa HHS will review all the input.**

- ▶ Iowa HHS may not reply directly to all comments they receive. They may revise parts of the waiver applications based on feedback.

What is the timeline for HOME?

# HOME Timeline

**2022 & 2023:** Iowa HHS evaluated the HCBS system and spoke with members, caregivers, advocates and providers across Iowa to identify key areas for the HOME Project.

**2024:** Iowa HHS rolled out standardized case management training and lowered caseloads to give case managers more time with members.

**2025:** Iowa HHS submitted amendments to their existing HCBS waivers that will go into effect in January 2026.

Changes from these amendments include, moving assessments from managed care organizations (MCOs) to an independent assessor and combining a few similar services to make them easier to use and help members find the right services to match their needs.

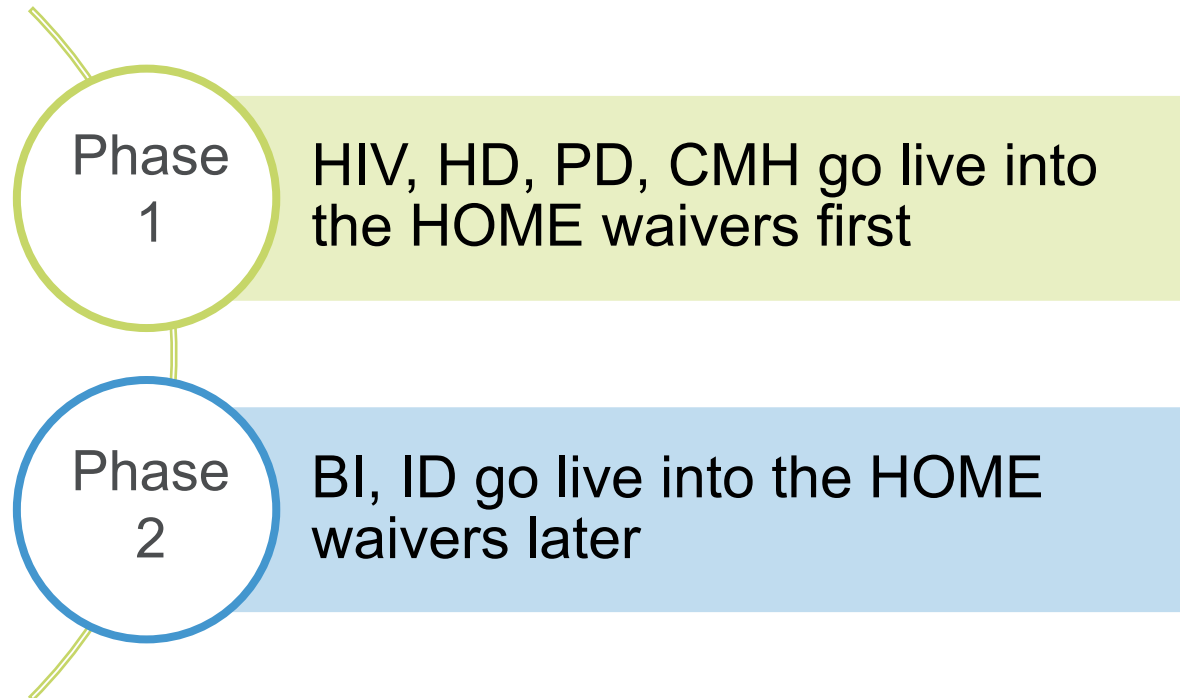
# HOME Timeline – Looking Ahead

**2026:** In October, Iowa HHS will transition members enrolled on the: Children's Mental Health (CMH), Health and Disability (HD), Physical Disability (PD) and AIDS/HIV (HIV) waivers into the HOME waivers: the Adults with Disabilities (AD) and Children and Youth (CY) waivers. The AD and CY waivers will also serve Iowans with developmental disabilities and autism.

**2027 & Beyond:** Iowa HHS will transition members enrolled on the Intellectual Disability (ID), and Brain Injury (BI) waivers into the HOME waivers and will add Supported Community Living, Residential Based Supported Community Living, Day Habilitation and Enabling Technology for Remote Supports onto the HOME waivers.

# HOME Waiver Implementation Phasing

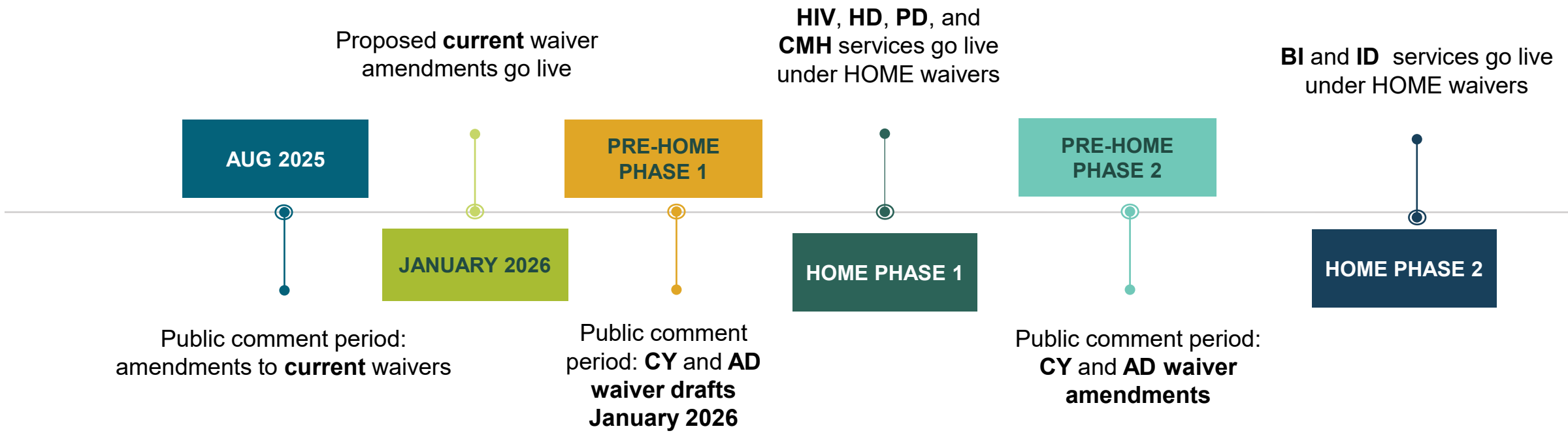
**The implementation of HOME waivers will be phased; not all services will be transitioned in initially.**



Note: Elderly waiver is not currently part of the phasing plan and will remain in place after HOME waiver implementation.



# HOME Implementation Overview



# Populations served on the proposed waivers

## CURRENT HCBS WAIVERS (2025)

WAIVER	GROUPS SERVED	AGES SERVED
<b>Elderly</b>	• Aging	65+
<b>Intellectual Disability (ID)</b>	• ID	0+
<b>Brain Injury (BI)</b>	• BI	0+
<b>AIDS/HIV</b>	• AIDS/HIV	0+
<b>Health &amp; Disability</b>	• Physical disability; blind or disabled	0-64
<b>Physical Disability (PD)</b>	• PD; blind or disabled	18-64
<b>Children's Mental Health</b>	• Serious emotional disturbance (SED)	0-17



## PHASE 1 (2026)

WAIVER	GROUPS SERVED	AGES SERVED
<b>Elderly</b>	• Aging	65+
<b>ID</b>	• ID	0+
<b>BI</b>	• BI	0+
<b>Children &amp; Youth</b>	• AIDS/HIV • BI • ID • PD; blind or disabled • SED • Developmental Disabilities • Autism	0-20
<b>Adults with Disabilities</b>	• AIDS/HIV • BI • ID • PD; blind or disabled • Development Disabilities • Autism	21+



## PHASE 2

WAIVER	GROUPS SERVED	AGES SERVED
<b>Elderly</b>	• Aging	65+
<b>Children &amp; Youth</b>	• AIDS/HIV • BI • ID • PD; blind or disabled • SED • Developmental Disabilities • Autism	0-20
<b>Adults with Disabilities</b>	• AIDS/HIV • BI • ID • PD; blind or disabled • Development Disabilities • Autism	21+

What are the major updates  
to the HOME waivers?

# What are the major updates underway and upcoming for HOME?

## January 2026

- **Waitlist:** Expanding the Waiver Priority Needs Assessment (WPNA) to help HHS better understand the needs of people on waitlists, including if people are at risk of institutionalization.
- **Service packages:** Streamlining service definitions and aligning definitions across waivers.
- **Assessment:** Implementing the core questions component of the uniform assessment, with all waiver members using interRAI assessment tools.

## Phase 1

- **Assessment:** Implementing last part of full uniform assessment process (utilization of the assessment questionnaire).
- **Service packages:** Aligning service packages with state plan services and adding two new waiver services.
- **Eligibility:** Expanding AD and CY waiver populations to include developmental disability and autism.
- **Service Funding:** Implementing a monthly funding limit based on level of care.

## Phase 2

- **Service funding:** Implementing My Service Plan Limit (mySPL), a monthly funding limit for services based on assessed need.
- **Service packages:** Adding services currently only on BI and ID waivers to AD and CY waivers.

# What are the waitlist updates?

**Waitlist Screening and Prioritization: See Appendix B-3 of the waivers for more information**

- ▶ People on a waitlist can choose to fill out the **Waiver Priority Needs Assessment (WPNA)**. The WPNA collects information about your needs and recent medical history, including urgent needs. You can download the WPNA from HHS's website or request a copy from your case manager and then mail it to HHS. In the future, there will be an option to submit electronically.
- ▶ People will be assigned a score based on their responses to the WPNA. This score and how long they've been waiting will determine their place on the waiting list.
- ▶ People can resubmit the WPNA at any time, including when their needs or circumstances change.
- ▶ **What is changing:** Iowa HHS will expand the WPNA to include more questions to help better understand the needs of people on waitlists, including if people are at risk of needing to go into an institution, starting in January 2026.

# What are the eligibility updates?

**Assessment and Eligibility: See Appendices B-6, C-4 and D-1 of the waivers for more information**

- **What is changing:** Starting in Phase 1, people with developmental disabilities and people with autism will be eligible for HOME waivers.



# What are the assessment updates?

**Assessment and Eligibility: See Appendices B-6, C-4 and D-1 of the waivers for more information**

- ▶ The uniform assessment is a process that looks at a person's unique strengths and needs to measure level of need. It includes a **core set of questions** that will be asked of all members to consistently and accurately measure level of need and **additional questions** based on each person's unique diagnosis and needs.
- ▶ The uniform assessment includes different tools developed by an organization called interRAI. Iowa HHS has been using interRAI assessment tools since 2015 for persons served by six of the seven waivers.
- ▶ **What is changing:** Iowa HHS will implement the core questions of the uniform assessment starting in January 2026, with all waiver members using interRAI assessment tools.
- ▶ In Phase 1, Iowa HHS will implement the full uniform assessment process.

# Which interRAI tools will members complete?

interRAI Tool	Members who will complete the tool
Intellectual Disability (ID)	Adults with ID who are 18 years and older.
Home Care (HC)	Adults with disabilities other than ID who are 18 years and older.
Pediatric Home Care (PEDS-HC)	Children and youth with health needs ages 4 to 17.
Child and Youth Mental Health (ChYMH)	Children and youth with serious mental illness ages 4 to 17.
ChYMH- Developmental Disabilities	Children and youth with developmental disabilities ages 4 to 17.
Early Years	Children ages 0 to 3.

\*In addition to the core set of questions, the uniform assessment includes different tools designed for different populations. Each year, members and their care team will determine which interRAI tool is the best for their unique needs.

# What is the uniform assessment process?

1

Members on the waitlist complete the optional **Waitlist Priority Needs Assessment (WPNA)** to share information about their needs

3

All waiver members complete:

**core questions**

to provide consistent information across all members

+

**additional questions**

based on their needs and diagnosis

2

Once enrolled in waivers, new and current members complete the **Assessment Tool Questionnaire** to route them to the right interRAI assessment tool

# What are the service funding updates in Phase 1?

**My Service Plan Limit: See Appendix C-4 of the waivers for more information**

- ▶ For Iowa HHS to distribute limited Medicaid funds in the most consistent and sustainable way, members will receive service funding based on their assessed needs.
- ▶ Iowa HHS will create the service funding limits based on real evidence. To do this, they will gather detailed information on levels of need, service use, and spending for all members.
- ▶ This means Iowa HHS will use an initial approach for service funding in **Phase 1** and improve it over time. In 2026, members will be assigned a monthly cap on services based on their assessed level of care. Monthly caps on services are already used on several of the waivers today.

# What are the service funding updates in Phase 2?

- ▶ In Phase 2, each member will have a monthly dollar amount for services called **My Service Plan Limit (mySPL)**, determined by their level of need assessment.
- ▶ What to know about mySPL:
  - The goal of the HOME waivers is to better match services with each person's needs. Some members may see changes in their funding. Members will work with their care team to make a person-centered service plan that meets their needs within their SPL.
  - Home and Vehicle Modifications, Supported Community Living, Residential-based Supported Community living, Specialized Medical Equipment, Community Transition Services and Supported Employment don't count toward mySPL.
  - If the funding amount a member is given isn't enough to cover the services they need, they can ask for more through a consistent review process.
  - If members do not use their full monthly funding, the leftover amount will not carry over. This will not affect future funding amounts.
  - If members cannot find staff for a period, this will not affect future funding amounts.
  - Service plan limits are different from service rates.

# What are the service packages updates underway?

**Service packages: See Appendix C of the waivers for more information**

► **Starting in January 2026, Iowa HHS is making updates to service packages:**

- Iowa HHS updated some service definitions to be more consistent and clearer.
- Iowa HHS combined a few similar services across the waivers to make it easier for members to find and use services that match their needs.
- Most services are not changing, but some services have new names. Others will be combined with similar services to make a new service. For example, parts of the Homemaker, Chore and Senior Companion services have been combined into a single service called Home Maintenance Support.



# What are the upcoming service packages updates?

**Service packages: See Appendix C of the waivers for more information**

## ► During Phase 1:

- The HOME waivers will include two new services called Peer Mentoring and Community Transition Service.
  - Service packages will be aligned with state plan services, meaning services already offered through the state plan will no longer be offered through the waivers.
  - In-home Family Therapy, Interim Medical Monitoring and Treatment (IMMT) and Skilled/Unskilled Attendant Care will not be offered on the Children and Youth (CY) waiver because they are already covered through Iowa Care for Kids, sometimes called EPSDT.
  - Counseling is not offered on the HOME waivers due to overlap with state plan mental health services.
- Some services that are currently only on the ID and BI waivers will not join HOME until Phase 2

# Phase 1: AD Waiver Service Package

Service packages: See Appendix C of the waivers for more information

## Daily activities and care

- Attendant Care (Skilled and Unskilled)
- Companion
- Home Health Aide
- Home Delivered Meals
- Home Maintenance Support
- Respite
- Transportation

## Health Needs

- Positive Behavioral Support and Consultation
- Family Training
- Interim Medical Monitoring and Treatment
- Nursing
- Nutritional Counseling

## Equipment and modifications

- Assistive Devices
- Home and Vehicle Modifications
- Personal Emergency Response System
- Specialized Medical Equipment

## Day Services

- Adult Day Care
- Prevocational Services
- Supported Employment

## Residential Services and Supports

- Assisted Living

## Self-Direction Supports

- Financial Management Service
- Independent Support Broker
- Individual Directed Goods and Services

## New Services

- Community Transition Services
- Peer Mentoring

# Service Crosswalk for Members Moving Onto the AD Waiver

**Service packages: See Appendix C of the waivers for more information**

- ▶ Counseling, which is currently on the HIV waiver service package, will not be on the AD waiver.
- ▶ The table below shows how people over age 21 transitioning to the AD waiver can access counseling services.

What you receive today	What you can receive after October 1, 2026
<b>Counseling</b> (H0004, 96164, 96165) through HIV waiver	<b>Individual or group therapy</b> (90832, 90834, 90836) through state plan services

# Phase 1: CY Waiver Service Package

**Service packages: See Appendix C of the waivers for more information**

## **Daily Activities and Care**

- Home Delivered Meals
- Respite
- Transportation
- Medical Day Care for Children

## **Health Needs**

- Positive Behavioral Support and Consultation
- Family and Community Support

## **New Services**

- Community Transition Services
- Peer Mentoring

## **Equipment and Modifications**

- Assistive Devices
- Home and Vehicle Modifications
- Personal Emergency Response System

## **Day Services**

- Prevocational Services
- Supported Employment

## **Self-Direction Supports**

Financial Management Service

Independent Support Broker

Individual Directed Goods and Services

# Service Crosswalk for Members Moving Onto the CY Waiver

Service packages: See Appendix C of the waivers for more information

- If you are under 21 years old and accessing waiver services, some of your existing services may not be included on the CY waiver service package. The table below shows how some current waiver services will transition to state plan services.

What you receive today	What you can receive after October 1, 2026
<b>In-home Family Therapy</b> (H0046) through CMH waiver	<b>Family training and counseling</b> (T1027) through the CY waiver
<b>Counseling</b> (H0004, 96164, 96165) through HIV waiver	<b>Individual or group therapy</b> (90832, 90834, 90836) through state plan services
<b>Attendant Care- Unskilled (T1019, S5125)</b> through HIV, HD, or PD waivers	<b>Personal Care</b> (S9122 -Rev. Code 572) through state plan services
<b>Attendant Care- Skilled</b> (T1019 U3, S5125 U3), <b>Home Health Aide</b> (T1021), <b>Nursing</b> (T10310, T1031, S9123, S9124), or <b>Interim medical monitoring and treatment (IMMT)</b> (T1002, T1003, T1004, T1004 U3) through HIV, HD, or PD waivers	<b>Private Duty Nursing</b> (T1000, Rev. Code 559) through state plan services

# Service Crosswalk for Members Moving Onto the CY (Cont'd)

Service packages: See Appendix C of the waivers for more information

- ▶ There are other services that young adults (age 18-20) may be receiving on their current waivers (HIV, HD) that are not a part of the CY Waiver.
- ▶ These services are not included in the CY waiver because they are adult services, and they are currently used by very few members under age 21.
- ▶ These are listed below; young adults accessing these services should work with their case managers to identify which of the following alternatives may best meet their needs.

What you receive today	What you can receive after October 1, 2026
<b>Adult Day Care</b> (S5100, S5100 UA, S5101, S5102, S5105) through HD waiver	<b>Young adults may instead benefit from:</b> <ul style="list-style-type: none"><li>• <b>Medical Day Care for Children</b> (T2027) through the CY waiver</li><li>• <b>Supported Employment</b> (T2018, H2025, H2023) through the CY waiver</li></ul>
<b>Homemaker</b> (S5130) or <b>Home Maintenance Support</b> (S5120) through HIV and HD waivers	Young adults living on their own who accessed these supports before should instead identify natural supports and community resources to help cover these needs.



# Moving to the HOME waivers

# What are the next steps for the HOME waivers?

**Transition Plan: See the beginning of the waivers for more information**

**The transition plan is a detailed plan to ensure current members continue to receive care smoothly and to make the transition as easy as possible for them.**

- ▶ In Phase 1, CMH, HD, PD and HIV waiver members will transition to the HOME waivers. BI and ID waiver members will transition in Phase 2. Members will keep their level of care assessment and care plan.
- ▶ Iowa HHS will make sure care continues smoothly for any limited or removed services. MCOs must follow existing service plans and cannot cut or stop services without a new assessment. The number of people served through HCBS waivers will not be reduced.
- ▶ Waiver services and policies on coverage will stay the same as they are now. Changes will aim to make services clearer, fairer, and more accessible based on needs, not just diagnoses.
- ▶ HHS will complete the transition plan and will use a person-centered approach to reach out and inform members and caregivers through various methods.

# What is the process for transitioning from the CY waiver?

**Transitioning between the waivers: See Appendix B of the waivers for more information**

- ▶ About six months before a member turns 21, their case manager will check if they want to move to the AD waiver and see if they qualify.
  - Just like today, some youth who qualify for the CY waiver may not qualify for the AD waiver. If that happens, the case manager will help them find other services to meet their needs, such as through the 1915(i) habilitation program.
  - If the youth is eligible, the case manager will help them apply for the AD waiver, get a disability determination and update their service plan as needed.
  - Waivers will have reserved capacity slots so youth who have been receiving services, or who have been recently approved, can move straight onto the AD waiver when they turn 21, without being put on a waitlist.
  - After switching to the AD waiver, members will go through an assessment to update their level of need, following the usual assessment schedule.

# Overview of the waiver applications

## Appendix A

- Use of contracted entities

## Appendix B

- Clinical eligibility (B-1)
- Reserved Capacity (B-3)
- Waitlist prioritization (B-3)
- Financial eligibility (B-4 and B-5)
- Level of care evaluation (B-6)

## Appendix C

- Service packages (C-1)
- Service definitions and limits (C-1)
- Provider qualifications (C-1)

## Appendix D

- Service plan development (D-1)
- Service plan implementation and monitoring (D-2)
- Service plan quality improvement measures

## Appendix E

- Participant Direction of services (E-1)
- Opportunities for participant direction (E-2)

# Overview of the waiver applications (cont.)

## Appendix F

- Opportunity to request a fair hearing (F-1)
- Additional dispute resolution process (F-2)
- State grievance complaint system (F-3)

## Appendix G

- Response to Critical Events or Incidents (G-1)
- Restraints and Restrictive Interventions (G-2)
- Medication Management and Administration (G-3)
- Quality Improvement

## Appendix H

- Quality Improvement Strategy: Systems Improvement (H-1)
- Quality Improvement Strategy: Use of a Patient Experience of Care/Quality of Life Survey (H-2)

## Appendix I

- Financial Integrity and Accountability (I-1)
- Rates, Billing and Claims (I-2)
- Payment (I-3)
- Non-Federal Matching Funds (I-4)
- Exclusion of Medicaid Payment for Room and Board (I-5)
- Payment for Rent and Food Expenses of an Unrelated Live-In Caregiver (I-6)
- Participant Co-Payments for Waiver Services and Other Cost Sharing (I-7)

## Appendix J

- Cost neutrality demonstration

# Where to find more information

# Information available

We will share information about the proposed waivers and changes on the [HOME webpage](#)

- ▶ Public comment notice/overview (plain language explanation of public comment period process)
- ▶ FAQ – HOME Waiver Redesign
- ▶ Cost Neutrality Demonstration (Appendix J) Quick Guide
- ▶ AD waiver quick guide
- ▶ CY waiver quick guide
- ▶ Elderly waiver quick guide (showing no changes)
- ▶ Assessment quick guide
- ▶ HOME Phase 1 service packages
- ▶ HOME Phase 2 service packages

# Submitting Public Comments

**Email:** [HCBS\\_Public\\_Comment@hhs.iowa.gov](mailto:HCBS_Public_Comment@hhs.iowa.gov)

**Written comments may be addressed to:**

Long Term Services and Supports Bureau  
Iowa Department of Health and Human Services  
Iowa Medicaid  
321 East 12th St.  
Des Moines, IA 50319-0114

**Scheduled Public Comment Period:**

Monday, January 12, 2026, through Friday, February 13, 2026



# Questions?