

Hope and Opportunity in Many Environments (HOME) Project Timeline

Already happened	What is happening next?	Future Changes (2027 and beyond)
• 2025: An independent organization started completing HCBS assessments. As part of conflict-free case management, managed care organizations no longer complete the assessments. • CareStar is the current independent assessor. • 2025: People on the Intellectual Disability Waiver began receiving interRAI assessments. • 2025: Iowa HHS reduced community-based case management caseload ratios and put in place requirements for more frequent in-person meetings and standard training for all case managers.	• October 2026: Iowa HHS plans to make the WPNA available online. • January 1, 2027: Iowa HHS plans to add selected services to its existing waivers.* • January 1, 2027: Iowa HHS is proposing to add autism and developmental disabilities as qualifying diagnoses for the Health and Disability (HD) Waiver.* • January 1, 2027: Everyone age 7 or older, except for Elderly Waiver members, will alternate between an interRAI assessment and an off-year assessment. The Intellectual Disability Waiver will move from a three-year assessment cycle to an off-year assessment cycle.	• Iowa HHS will replace the six diagnosis-based waivers with two age-based waivers: the Children and Youth Waiver and Adults with Disabilities Waiver. • The Elderly Waiver will remain separate. • Iowa HHS will provide updated guidance and transition support before the new waivers launch.

Already happened	What is happening next?	Future Changes (2027 and beyond)
• January 2026: Iowa HHS updated the Waiver Priority Needs Assessment (WPNA). This is an optional form that all people on a waitlist can fill out to share information about their needs. • January 2026: Iowa HHS updated and aligned some service definitions across the seven waivers. For example, Home Maintenance Support and Companion.	• January 1, 2027: Iowa HHS plans to implement a uniform HCBS fee schedule for fee-for-service HCBS providers. This means providers will be paid the same rate for a service, no matter what waiver a member is enrolled on.	

*This change requires approval by the Centers for Medicare and Medicaid Services (CMS).