

HOME Project Steering Committee - Meeting Summary

Tuesday, September 29th, 2026, from 3:00 – 4:30 P.M. CT

Meeting Kickoff

Jamie Edwards, Iowa HHS

Steering Committee Members were welcomed to the September 2026 meeting. The September Steering Committee focused on HOME project timeline updates, new waiver services overview and solicitation of feedback on communication around these new services, HOME Communications updates, and Meeting Follow-Up to address questions members posed during the August 2026 meeting.

HOME Project Updates

- October 2026 – Improve Access to Waitlist Support
 - Iowa HHS is making the Waiver Priority Needs Assessment (WPNA) easier for Iowans to access. The WPNA will be available online allowing Iowans a digital option to submit or update when their needs change.
- January 1, 2027 - A uniform HCBS fee schedule
 - Iowa HHS will pay the same fee-for-service rate for the same service across all waivers.
- January 1, 2027 –Proposed new services for existing waivers

Waiver	Proposed service changes in January 2027
AIDS/HIV	Add Peer Mentoring, Community Transition Services, Prevocational Services and Supported Employment
Brain Injury	Add Peer Mentoring and Community Transition Services
Children's Mental Health	Add Peer Mentoring
Elderly	No service changes
Health and Disability	Add Peer Mentoring, Community Transition Services, Prevocational Services and Supported Employment
Intellectual Disability	Add Peer Mentoring and Community Transition Services
Physical Disability	Add Peer Mentoring and Community Transition Services

- The seven (7) existing waivers will remain in place in 2027 and some will add services.
 - Public comment is currently open now through October 23, 2026 at 4:30 p.m.
- January 1, 2027: Proposed expanded eligibility for the Health and Disability waiver
 - Iowa HHS is proposing to add autism and developmental disabilities as qualifying diagnoses for the existing Health and Disability (HD) waiver.
 - If CMS approves the change, people with autism or a developmental disability could qualify for the HD waiver beginning January 1, 2027. They would not need to wait for the future Children and Youth (CY) or Adults with Disabilities (AD) waivers to launch to be eligible for waiver services.
- January 1, 2027: Alternating Full and Off-Year Assessments
 - Starting January 1, 2027, all waivers except the Elderly waiver will use a two-year assessment cycle for people age 7 and older.
 - There will be two types of assessments:
 - Full assessment: A complete interRAI assessment done every other year.
 - Off-year assessment: A shorter assessment completed by phone in the year between full assessments.
 - If the off-year assessment shows that a person's needs have changed, they will receive a full interRAI assessment. People under age 7 will continue to have a full interRAI assessment every year.
 - Intellectual Disability (ID) waiver: Starting January 2027, the ID waiver will also switch to alternating full and off-year assessments every year, instead of the current 3-year cycle.

Steering Committee Member Feedback:

- Members vocalized positive reception to the proposed change regarding alternating full assessments and the shorter off year assessment. This positive response was centered on how this change would decrease the time an individual would have to dedicate participating in assessments when the waiver member's condition does not change.
- Members vocalized concern about the proposed adoption of a uniform fee schedule and identified this was a topic they felt additional information needed to be shared out on. Steering Committee members specifically raised concern

about rates related to CCO, CDAC, and reported staffing challenges citing inability to offer competitive wages based on proposed reimbursement rates.

New Waiver Service- Community Transition Services

Steering Committee members were provided with information around the proposed service- Community Transition Services.

- Community Transition Services help pay for one-time expenses that allow a member to set up a basic household when moving into a private residence.
- Community Transition Services are covered when:
 - The expense is reasonable and necessary
 - It is included in the member's person-centered service plan
 - The member cannot afford it or get it from another source
 - It supports the goal of helping the member live in the community instead of an institution

Steering Committee Recommendations

Steering Committee Members were asked to provide input to inform how HHS could communicate about the community transition services to stakeholders. The recommendations solicited were focused on identifying which pieces of information would be most important, what information about the services was clear, what information needed to be added or revised to be more easily understood, and what questions remained about the new service to be offered.

Steering Committee Members reported identifying the common examples of what could be covered was helpful. Steering committee members questions related to this service included:

- Why are only land lines (not cell phones) a covered expense under community transition support?
- Would an adult waiver member transitioning to the community following incarceration qualify?
- Would application fees for a rented home or apartment be a covered expense?
- Would a pet deposit charged by a landlord be excluded expense?
- Can community transition services be accessed when a waiver member is participating in Money Follows the Person?

New Waiver Service- Peer Mentoring

Steering Committee members were provided with information around the proposed service- Peer Mentoring.

- Peer Mentoring provides support from someone with lived experience as a waiver member, family member, or unpaid caregiver.
- The peer uses their experience to help a waiver member adjust to community living and remain successfully in the community.
- Peer Mentoring is a community-living support service. It is not clinical treatment, case management, service coordination, or general companionship or socialization.
- Peer Mentoring is authorized only when it addresses a specific, assessed need related to living successfully in the community. Activities should help the member build skills, confidence, relationships, or supports needed to live independently in the community.

Steering Committee Recommendations

- Peer Mentoring materials about this service should include clear callouts about the availability of this service via telehealth
- Materials should include examples what activities could be a part of this service and clarify where can this service be provided.
- Additional information about the Peer Mentors
 - Training, required qualifications, minimum age allowed
 - Are the peer mentors compensated? If so, what is the rate of compensation?
 - How is a peer mentor matched to a member? Is re-matching allowed if the peer mentor is determined to not be a good fit?

Steering Committee Members identified additional questions or considerations about the service in general, that would need to be defined but would not necessarily be featured in a one-page overview: regarding who can be a peer mentor, the complaint process for a member participating in this service, and clarification on if this service was offered to those participating in CCO. Steering Committee Members cautioned the use of the word peer, as it may be misleading as an individual who truly shares lived experience with the member may not be viable peer (such as a waiver member who is non-verbal). Members also recommended consideration of the peer mentor's location when matching, as those residing in a rural area versus an urban city may have very different lived experience.

HOME Communications

Iowa HHS provided an update on HOME Communications, sharing that the HOME website is being reorganized. Outdated materials were removed but many of these resources will be replaced with updated versions when available.

- New features to the HOME will include:
 - Browsing by topic
 - Browsing by audience
 - Clearer timelines
 - Updated quick guides and FAQs
- Case managers and call centers are being prepared with updated information, resources, and talking points.
- Steering Committee will be asked to review updated pages at future meetings.

Members emphasized:

- Need for *plain language*.
- Need for clear instructions on how to apply for waivers.
- Appreciation for the plan to reorganize the website with ability to browse specific topics

Follow Up Items from August Meetings

HHS shared updates from the LTSS Policy SMEs about questions, concerns, confusion, or other feedback that had been provided during previous steering committee meetings around several key areas:

- Steering Committee Membership & Documentation
- Case Management after the Waiver Redesign
- CY → AD Transition & Member Support
- Communication & Transition Materials
- Eligibility & Disability Requirements
- Notice of Decisions (NODs)
- Assessment Delays

Overall Takeaways HHS heard from Steering Committee Members

Steering Committee Members reported concern on the future of the HOME Project and the absence of a clear timeline for the full waiver redesign. Members reported that the lack of transparency and information being shared was eroding public trust and generating frustration as lowans continue to struggle within the current waiver system. Members expressed concern that the HOME project's original goals and motivation for the redesign would not be carried out.

Steering Committee members iterated they want to continue to be involved as thought partners, lived-experience experts, and serve as informed advocates as the project progresses.