

COMMENT LOG
Aged and Disabled Waiver (ADW) Application
Public Comment Period: February 14, 2025, to March 17, 2025

<u>Number</u>	<u>Date Received</u>	<u>Comment</u>	<u>Status Result</u>
1	2/25/2025	<p>I would like to say that being able to work as a field nurse in the WV Personal Care Program/ADW/TBI PROGRAM is a blessing to me and the community!</p> <p>Our forgotten elderly, our stroke victims, our injured neighbors and our recovering drug addicts (which every WV family has been traumatized by with this sad era in our history by pharmacy companies' greed) that need just a little assistance, encouragement and respect, to help remain safe in their homes. THIS PROGRAM provides that support that they to be able to function safely in their homes and communities!</p> <p>Thank you for supporting them. Thank you for allowing me to be able to be your 'hands extension' to them that are fortunate to benefit from this HELPFUL PERSONAL CARE/ADW/TBI PROGRAM!</p> <p>Thank you</p>	No Change. Comment does not include policy recommendations for changes.
2	3/9/2025	OUR ASK: please continue to invest in home care programs and do not implement percentage-based pass-through models at WV Medicaid, such as flawed models proposed by the Biden Administration. We fully support the \$47+ million included in Governor Morrisey's proposed FY 2026 budget for the ADW program!	No Change. Comment does not include policy recommendations for changes.
3	3/9/2025	OUR ASK: please allow ADW and PC agencies to submit data to the state via spreadsheet, via the agency's EVV system, or via the WVCARES system, as long as all required/essential data elements are met (demographic info, start date, First Aid/CPR, WVCARES, required training, etc). Please, do not create a new web portal for this process, but allow current systems to capture and share this data.	No Change. The waiver renewal removes the requirement to use the Provider Continuing Certification Verification System. Providers must continue to use this system until CMS approves this change.
4	3/9/2025	OUR ASK: please allow agencies to bill via Gainwell for ADW and PC services, outside of the HHAX (or other) aggregator system. Village Caregiving is open to billing through the EVV aggregator as long as that system is reformed, along with the burdensome three-vendor system and process that currently exists.	No Change. The current waiver allows providers to use electronic systems that capture, and report all required data. No change made to the renewal waiver.

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5	3/9/2025	OUR ASK: please simplify the EVV process, from beginning to end, to involve one vendor and release RFP for an EVV aggregator, using lessons learned and national best practices to guide the language and mandatories in the RFP.	No Change. The comment does not include policy recommendations for changes.
6	3/9/2025	OUR ASK: please allow agencies to collect documentation using their software of choice, as long as the essential elements of a PAL, RN Assessment, etc. are met. PLEASE NOTE: we understand the state intends to allow this moving forward.	No Change. The current waiver allows this process. No change to the renewal waiver.
7	3/9/2025	OUR ASK: please remove the “live-in” exemption related to EVV, so fraud, waste, and abuse can be uncovered in these situations. National data shows that F/W/A commonly occurs in these situations, so exempting these situations from the EVV mandate lacks common sense and logic. At the very least, please explain your rationale for continuing this exemption.	No Change. CMS does not require “live-in” personal attendants to participate in EVV. Providers may choose to require “live-in” personal attendants to participate in EVV.
8	3/9/2025	OUR ASK: reform the EVV process to eliminate the use of NPI numbers, OR as an alternative, continue to require NPI numbers, but allow agencies to enter the information into their EVV systems without going through burdensome credentialing/enrollment processes, which are not mandated in most states and EVV systems.	No Change. The current contract requires NPI numbers.
9	3/9/2025	Our ASK: please remove the 85% compliance requirement and any penalties associated with this requirement. If agencies are acting in good faith and attempting to comply the CURES Act and BMS EVV standards, disallowances should not be imposed.	No Change. The comment does not include policy recommendations for changes.
10	3/11/2025	I reviewed the current ADW Manual, effective May 1, 2023, and what is currently out for Public Comment. I previously raised questions regarding this document when it was first released for public comment, but I did not receive a conclusive response. After the manual became official, I revisited the document and observed that it was still absent. I have attached the document for your review and clarification on its usage.	No Change. The Case Manager Conflict of Interest Assurance Form for Home and Community Based Services must be completed with every member's waiver Service Plan/Individualized Program Plan and

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			stored in the member's file at the case management agency.
11	3/12/2025	<p>Two interested parties submitted this comment:</p> <p>Appendix B-3: Number of Individuals Served: The waiver renewal application does not include an increase in the number of individuals who can be served over the five years of the application period.</p> <p>The number of unduplicated slots (8,750) remains the same as the last two years of the current approved application period.</p> <p>According to the Census Bureau, 30% of West Virginia's population will be over 60 years old by the year 2030. This is a projected 10% increase over the next five years. The Council recommends considering increasing the number of unduplicated slots over the next five years.</p>	No Change. BMS reviews/evaluates slots regularly to determine if a waiver amendment for increases is needed.
12	3/12/2025	<p>Appendix C-1/C-3: Participant Services - Service Specification: Personal Attendant Services are offered from an average of 2-5 hours per day. The description of this waiver, "is a long-term care alternative that provides services that enable an individual to remain at or return home rather than receive nursing home care." The medical eligibility for this waiver is the same as a nursing facility. The level of services offered under this waiver are not comparable to that of a nursing home. The Council recommends evaluating the need to increase the level of support provided to better meet the needs of those in or at risk of nursing facility care.</p>	No Change. BMS will evaluate personal attendant service options in a waiver amendment.
13	3/12/2025	<p>Appendix C-1/C-3: Service Specification (Personal Care): The Council recognizes and appreciates that relatives of the Member can provide personal attendant services. This is especially crucial during this time of instability in the direct care workforce.</p>	No Change. Comment does not include policy recommendations for changes.
14	3/12/2025	<p>Two interested parties submitted this comment:</p> <p>Appendix E-1: Participant Direction of Services:</p>	No Change. BMS will continue to evaluate participation in self-directed services in a waiver amendment.

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		<p>The number of Members who can participate in self-directed options is the same as the current renewal application.</p> <ul style="list-style-type: none"> • Year 1 – 1315 • Year 2 through Year 5 – 1352 (each year) <p>This would reduce the number of current participants from year five of the current approved application to year one of the proposed application by 37 Members. Is this an error? The Council recommends maintaining the same number of participants in year one as in the other years.</p>	
15	3/12/2025	<p>General Comment: Array of Services and Respite</p> <p>Since 2015, this waiver has increased the types of services that are covered from four to 11. We appreciate the improvements so eligible individuals can receive the services they need. One area of concern is the lack of respite services. Members and family/other natural support caregivers would greatly benefit from the addition of respite services. The Council recommends this be considered for this and future applications.</p>	No Change. Comment does not include policy recommendations for changes.
16	3/13/2025	<p>This is a time Medicaid is under attack by the administration in Washington. DC. This is a program severely needed by our seniors and disabled young across the USA and the state of WV. If there is money for more tax cuts for the rich then there should be money for seniors and disabled, personally the tax cuts is nothing but theft . Actually the waiver program needs raises to get workers. Do the right thing !</p>	No Change. BMS oversees an annual capitation rate review. Waiver service rate increases began October 1, 2024.
17	3/17/2025	<p>We recommend the Department consider adding Structured Family Caregiving to an upcoming Waiver amendment to recognize these family caregivers and provide them with the consistent and comprehensive support they need and deserve to provide high quality.</p>	No Change. BMS will continue to evaluate new service options for a waiver amendment.