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November 26, 2025

NH Dept of & Human Services
Bureau of Developmental Services
Attn: Lindsey Magee (Via Email: DDWaiver@dhhs.nh.gov)
105 Pleasant Street, Main Building
Concord, NH 03301-3857

Re: DD Waiver Renewal

Dear Lindsey,

The NH Developmental Services Quality Council was created by the NH legislature “to provide leadership for consistent, systemic review and improvement of the quality of the developmental disability and acquired brain disorder services provided within New Hampshire's developmental services system” (RSA 171:A:33). The Quality Council is a group of people with disabilities, family members, advocates and professionals who come together with a variety of perspectives and experiences to improve the developmental disabilities and traumatic brain injury service delivery system in New Hampshire.

Thank you for the opportunity to submit comments on the current Developmental Disabilities waiver to be considered in the drafting of the waiver renewal. We understand the importance of the DD waiver to people with developmental disabilities and their families across New Hampshire and we support improvement.

Previous waiver comments

In June 2024, the Council issued comments to the Bureau which focused on current and proposed waiver services. We believe that these comments are still relevant to this discussion, even though funding for new services is limited and we support efforts to add additional services or incorporate these supports into existing services whenever possible.

These comments are intended to provide additional feedback to the Bureau.

1. Transportation - Transportation remains a significant barrier for people with developmental disabilities. The current transportation caps are too low and will not cover the actual transportation costs to travel to/from a job and other activities. There continues to be confusion regarding requests to exceed the transportation cap, and families are discouraged to request an exception. There is also confusion about who can be paid to provide transportation and who can be reimbursed for transportation expenses. The parental/family reimbursement rate for transportation is too low.

Transportation is not available across the state, and, in some places, it is not available when individuals need it. The Council supports contracting with on-demand ride services to increase transportation options but recognizes that it's not available across the state. Taxi cabs are also limited. There is no provider of non-medical transportation in the Monadnock region of the state.

Recent changes to transportation guidelines are difficult to navigate. People with disabilities don't always know when they will be finished with an activity and it is challenging to schedule a pickup time in advance without the flexibility to move it if needed.

Transportation is particularly important to people who are working and cannot drive. One member noted that the supported employment providers in their area cannot provide ongoing sustainable transportation without providing additional SEP services, something not all individuals need or desire.

The Council also has concerns about the reliability of non-emergency medical transportation which is supposed to be provided by the managed care companies. When non-emergency medical transportation is unreliable, difficult to schedule or not available, individuals are forced to use their waiver funded transportation, which is limited. One of the members of the committee was almost stranded. It is also confusing what transportation is the responsibility of the managed care companies and what is the responsibility of the DD waiver.

The Council strongly supports the addition of non-medical transportation in the waiver and encourages the Bureau to consider ways to support providers to add transportation to their service offerings so that there are more options across the state. Many people with developmental disabilities and their families still do not know that this service is available.

2. Paperwork – Council members noted that the paperwork burden for both families and providers is high and seems to have increased. Also, area agencies require different paperwork for the same service which is challenging for providers.

3. Staffing challenges – As the Council discusses regularly, the shortage of staff for direct support, case management and specialized services continues. This is challenging for people with disabilities who often need this support to reach their goals. The Council also

discussed the impact of losing staff. Sometimes there's no support for people in the transition – both in terms of the gap in services and in terms of the loss of a friend.

4. Dental Services - Access to dental services is still limited and some dentists require payment or do not take Medicaid, especially in terms of dentures and oral surgery. The Council would like the Bureau to explore whether more can be done using waiver services.

5. Aging - The Council recognized that the waiver may not be designed to meet the needs of people who are aging and encourages the Bureau to explore how the current services or others could be changed to better meet the needs of people with developmental disabilities who are aging. When people are aging, they may be less interested in some community-based activities or be interested in different activities, and the waiver must adapt to meet these needs. People who are aging may also need more support. For example, Wisconsin includes retirement activities in their day habilitation service.

NH's family caregivers are also aging, and the state must consider how their ability to provide support is ending or changing.

6. Community Participation Services – The Council appreciates the recent increased flexibility related to community participation services goals and the increased understanding of the specific needs of people with disabilities that may be outside the standard expectations.

7. Person centered planning – The Council appreciates that the waiver includes terminology related to person centered planning in many places in the waiver and that this has been a focus at the Bureau. However, the Council believes that providers need more training about what is expected in initial trainings and during annual refreshers. The Council is also concerned that the training is not standardized across the state. Providers are expected to make their own tests and supplemental materials. The Bureau must develop methods to person centered planning is actually happening as it should. We still hear that it is not really happening. The Council would like the Bureau to consider mandating certain trainings or at least making high quality trainings available to providers for both the yearly and every 5-year trainings.

8. Eligibility – Members are concerns about the eligibility determination and redetermination process. It does not seem like the local Medicaid offices have enough people and expertise to help Medicaid recipients now. The process takes too long, things are lost and customer support is not reliable. Members are concerned that this will get worse when recertification happens more frequently.

The Council is concerned that people will lose Medicaid in the recertification process. If individuals lose Medicaid, providers will not have the funds to continue to provide waiver support, even if they are able to recoup some funds. Providers don't have any control over this process and do not know how to help or who to call when someone loses Medicaid. One provider discussed someone who has been trying to get their Medicaid restored for over 4 months.

9. Starting services/Conflicts of Interest – Members are concerned about delays in the process for beginning waiver services. It is difficult to find providers and the process of starting services takes a long time.

When conflict of interest became top priority, providers hoped there would be some changes to the way that requests for proposals were circulated by the case managers so that people can access all the providers who can meet their needs. It does not seem like this is happening. It seems like service providers are still gatekeepers/suggesting good providers to people instead of helping them to explore all the options as required. One Council member said that she was required to choose a specific vendor. She was not given options.

The Council requests that BDS consider a performance measure about choice in the DD waiver. Also, could BDS add to performance measures something about choice? Could the Bureau require that individuals are given a list of providers that they must sign at each service planning meeting including the initial meeting where they should be given the choice of service coordinator agencies? In the experience of Council members, the discussion about providers generally lasts less than a minute. Families are not given choices, especially the choice of new providers. This includes the choice of services coordinators.

The Council hopes that the Bureau will strengthen the expectations regarding choice of providers for all services in all areas of the state. The Council believes that narrowing the focus of conflict free management requirements to area agencies as service providers and service coordinators was a disserve to the system as a whole. Choice of provider is much bigger.

10. 18-22 Gap – The Council remains concerned that there are gaps for people who are 18-22 who are who are transitioning out of school or still in school – 18-22.

11. Public Information - The Council is concerned that it is difficult to navigate the Bureau's website, which makes it hard for people to get information that they need.

12. New Services – The Council believes that all the proposed new services are important and will meet the different needs of people with developmental disabilities. The new service that the Council thinks is most important is homemaker services. Some people can't physically do chores or need support to do chores. This is important for people of all ages, especially people who are aging. Homemaker services can help people to stay in the community and can help to ensure that individuals pass required home inspections.

The second important service is peer support. The NHCDD, a member of the Council, is committed to assisting the Bureau to explore ways to provide this service. For example, budgeting is a clear need and seems like peer support could be a great resource. Access to a nutritionist is another important service.

Finally, recreation and community engagement are still important. There is still confusion about how things can be covered in different ways, but people still need the services that are no longer covered.

13. Guardianship – The Council believes that people with developmental disabilities should make as many choices as possible even when someone has a guardian. Guardians seem to have control and authority to make more decisions than they should. The Council should discuss guardianship in more detail and explore how to maintain and expand the ability of the person with disabilities to make more of their own decisions. The waiver and related services must support ability of person to be involved in own decisions is clear, even under guardianship. This issue is especially prevalent for people who are in residential settings and people who are navigating relationships.

14. Plain Language – The Council believes that it is important to share information about waiver services in plain language.

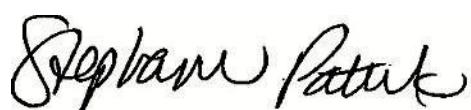
15. Transparency – It is important that decisions regarding waiver services are clear and communicated effectively. The Bureau must be transparent in their decisions as much as possible.

16. Gender neutral language - We continue to support the use of gender-neutral language wherever possible.

17. Services available and service coordination – There is still much confusion about what is actually covered by which service, especially with community integration, health and wellness, and good and services. There is also confusion about services with similar names like community participation, community integration. Front-line service coordinators should be helping families to understand these differences and to get the services that they need. The Council encourages the Bureau to connect with all service coordinators across the state to make sure they understand how the waiver can support individuals with disabilities, especially those who work with larger support coordination organizations.

Thank you for considering these additional comments.

Sincerely,



Stepanie Patrick
Rules & Regulations Committee, NH Developmental Services Quality Council



Emily K. Manire, MSW

Chair, New Hampshire Developmental Services Quality Council