



May 24, 2017

To Lakes Region Community Services (LRCS) Stakeholders:

I am writing to inform you about impending compliance issues that impact our service delivery model as an Area Agency.

#### Background Information

LRCS is reimbursed for In Home Supports (IHS), Developmental Disabilities (DD) and Acquired Brain Disorder (ABD) Services through Medicaid funding. Services are billed to New Hampshire's Home and Community Based Services (HCBS) Waivers for these categories.

These waivers are granted and administered by the Centers for Medicare & Medicaid Services (CMS), a federal program. The New Hampshire Department of Health and Human Services (DHHS) must reapply with CMS for renewal every five years. The renewal process is driven by the Bureau of Developmental Services (BDS.)

I apologize for the Alphabet soup but if you are one of our stakeholders this may not be new to you!

#### The Issue

Why are we talking about this? In the waiver renewal process this year, all three waivers have come under questioning from CMS for a couple of compliance issues. One of the issues in particular, Conflict of Interest, has the most significant impact for our families.

Per CMS:

States are required to separate case management from service delivery functions. In accordance with 42 CFR 442.301 (c)(1)(vi), New Hampshire (NH) must ensure that it's service delivery system is conflict-free. Specifically, this means that:

(vi) Providers of Home and Community Based Services (HCBS) for the individual, or those who have an interest in or are employed by a provider of HCBS services must not provide case management or develop the person-centered service plan, except when the State demonstrates that the only willing and qualified entity to provide case management and/or develop person -centered service plans in a geographic area also provides HCBS. In these cases, the State must devise conflict of interest protections including separation of entity and provider functions within provider entities, which must be approved by CMS. Individuals must be provided with a clear and accessible alternative dispute resolution process.

Plainly stated, BDS is telling LRCS that per interpretation of the CMS rule, we can no longer provide case management (resource coordination) along with residential and community participation services. We cannot be a case manager and a provider and be considered compliant with the CMS regulations. BDS was approved to file a corrective action plan to bring the NH waivers into compliance by July 2018. In one short year we are

being asked to restructure LRCS as we know it, to comply with the CMS regulations, otherwise NH risks losing its waivers and the ability to be reimbursed by Medicaid for the critical services we provide.

### Action Plan

So where do we go from here? The Board and Leadership of LRCS is committed to working through this issue with the dedication and due diligence that has allowed us to be the strong, private non-profit, social services agency that provides not only key services in the areas of IHS, DD and ABD but in total family support, Autism services, educational services and meeting needs found in the gaps for the communities we serve.

This means that while we will participate in work groups on this issue organized by DHHS and BDS; and Community Support Network Inc. (CSNI), (the not-for-profit organization that works in support of the 10 Area Agencies throughout the state of NH), we will also develop our own action plans, through a variety of focused efforts. While we understand the BDS position of direct compliance with the CMS rule, we also respect the history of a system that was developed from a grass roots commitment to local solutions for a population that deserves our utmost care and attention.

We believe that there is always room for improvement and are dedicated to moving forward, however this mandate does not “feel” like a step forward. Instead it presents as a bureaucratically driven distraction from the 45+ years of proud progress in NH’s system. To that end we also intend to bring families and politicians together to participate in a solution that advocates for the NH way.

### Next Steps:

- DHHS has developed a workgroup with a limited number of stakeholder representatives that have been chosen, however the meetings held by this group are public meetings. LRCS is not represented (there are representatives from other Area Agencies) but we will send people to attend. We will also post the meeting times and places on Facebook and our web page, as anyone is free to attend.
- LRCS will form a local workgroup which will be comprised of LRCS Executive Management, Board Members, Family Support Council, community, family and individual representatives. If you are interested in participating in this workgroup please e-mail me at [Rebecca.Bryant@lracs.org](mailto:Rebecca.Bryant@lracs.org)
- LRCS will host an information session on this topic in Laconia, at the Main Office (719 North Main Street) on Monday, June 26<sup>th</sup>, at 6 p.m. as well as one in Plymouth, at the Pease Public Library community meeting room, on Tuesday, June 27<sup>th</sup> at 5 p.m. Childcare and pizza will be provided. RSVP required: [Stakeholder@lracs.org](mailto:Stakeholder@lracs.org)

Action plans and compliance with this issue is my major focus over the next 12 months. I am deeply committed to honoring LRCS’ history, protecting the individuals and families we serve, and ensuring that we are here for 45+ more years serving the needs of our community. This system arose because of family advocacy, it sustains

and grows with family and community support. We have faced adversity many times before and always arrived at a solution that is stakeholder driven. This time will be no different.

Please do not hesitate to call or e-mail me if you have questions, comments or concerns. My job is, as always, to listen, learn, and lead.

In your service,

*Rebecca L. Bryant*

Rebecca L. Bryant  
President & CEO