



Self-Directed Advocacy Network of Maryland, Inc.

THE SELF-DIRECTED SERVICES ACT OF 2022 (HB1020/SB868)

Self-direction allows an individual with Intellectual/Developmental Disabilities to have choice and control of their Medicaid waiver services, including choosing the staff that supports them (employer authority) and how their budget is spent (budget authority) so they can tailor their daily activities to meet their own needs and interests.

History: Maryland was a trailblazer with its Self-Direction (SD) Waiver in 2005

- 2013/2014 – it was combined with the provider-centered Waiver which meant less choice, control and flexibility for SD
- 2016 – further DDA changes took away many participant choices and control
- Grassroots efforts since then culminating in this Act

Goals:

- To achieve greater equity by ensuring that people in disadvantaged communities, those with language barriers and those who lack robust family supports can also access SD
- To restore and maintain flexibility and access to SD while retaining cost-savings
- To ensure that anyone be deemed capable of self-directing with the needed supports

The bill stipulates:

1. Case managers (CCSes) will be better trained in self-direction and will fully orient new and current participants about self-direction annually (PCP).
2. Reinstate Support Broker roles and increase hours available where needed.
3. Reinstate Self-Directed Overnight Supports (this waiver service removed in 2018)
4. No Prohibition to Having Family as Staff per CMS rules
5. Transparency in Person Centered Planning (PCP) – ability to track
6. Mileage Reimbursement for Specialized Vehicles
7. Remove Competency Requirements in Favor of Team Support
8. Parity in Budgets/Services – SD doesn't have all needed services
9. Individual Family Directed Goods & Services (IFDGS) to be more flexible per needs
10. Progress Report to Legislature Annually – 3 years

Takeaway:

- **NOTHING** in this bill causes the state to lose federal matching dollars.
- **EVERYTHING** in this bill complies with CMS rules/regulations ensuring federal match.
- **Policy changes can be addressed with current allocations - no increase in cost.**
- **SD services are generally less expensive than traditional provider managed services.**