NH BDS System Redesign for Developmental Disabilities

“Nothing about us, without us” must be honored

What has happened so far?
The NH Bureau of Developmental Services (BDS) is spearheading a system transformation effort driven by a need for federal compliance and recommendations from a national consulting firm, Alvarez and Marsal (A&M). The A&M recommendations have become decisions.

To achieve Federal compliance the state must:
1. Eliminate conflicted situations and
2. Implement direct billing by July 1, 2023 (requiring a redesign of reimbursement rates).

However, the Federal government, specifically The Center for Medicare and Medicaid (CMS) recognizes the stress that the national system is currently under and has demonstrated a willingness to extend other deadlines in the past.

At the same time, BDS moved forward with a full system redesign, during a pandemic and an unprecedented workforce crisis.

The stated goal of the redesign is equity for eligible individuals, cost savings and administrative ease. Current estimated cost savings with system redesign is less than $200,000 per year in an over $300 million dollar system.

What are the greatest concerns?
- Speed of decisions being made and timeline of implementation. It would be sensible to slow the implementation down so change to the system can be done right.
- Inadequate attention being paid to operational changes causing confusion and poor service.
- Ensuring new rates don’t decrease services or destabilize the system.
- Bringing in an additional Supports waiver to control utilization.
- Creating a cap and limiting service options.

What can you do?
- Attend informational sessions on the BDS System Redesign.
- Ask questions and give feedback on the BDS System Redesign to DHHS, BDS and CMS.
- Inform Legislators including Executive Councilors and the Governor on the issues.
- Inform your community, individuals, parents and more about this issue and potential impacts.

What is happening now?
An Advisory Committee and four workgroups have been convened for waiver design, rate development, communications and DSP job design.

These workgroups are comprised of individuals, family members, advocates, providers and area agencies to work on aspects of these efforts and offer input. These groups are only Advisory in nature and DHHS and BDS does not have to enact any suggestions from these groups.