HOPE Waiver Renewal Public Comment Summary and State Responses

Public Comment Period: March 25, 2026 – April 24, 2026

The South Dakota Department of Human Services, Division of Long Term Services and Supports (LTSS), provided a 30-day public comment period regarding the proposed renewal of the HOPE Waiver. Comments were accepted via phone, email, mail, and during a public Town Hall conference call held on April 9, 2026. Division staff presented information about the proposed renewal to Tribal Consultation on April 21, 2026, and to the Medicaid Advisory Committee on April 23, 2026.

All comments received during the public comment period were reviewed and considered. A summary of comments and the Department's responses are provided below.

	Comment	State Response	Resulting Waiver Updates
1	Two commenters expressed overall support for the proposed HOPE Waiver renewal updates, including the state's efforts to maintain participant access to care, strengthen oversight, align with federal standards, and clarify services.	LTSS appreciates the commenters' support for the proposed HOPE Waiver renewal updates.	None
2	One commenter requested clarification or revision to the proposed language regarding participant safety and choice, expressing concern that revised wording could be interpreted as limiting a participant's ability to knowingly assume risk in order to remain in the community. The commenter recommended restoring clearer language supporting informed choice and dignity of risk.	LTSS appreciates the comment and agrees the language should clearly support participant autonomy and informed choice. LTSS has revised the waiver language accordingly to further clarify the participant's or legal representative's ability to make an informed choice to assume risks associated with receiving services in the home or community.	Language was updated in the renewal from "Its [the HOPE Waiver] purpose is to reduce unnecessary nursing facility care by supporting individuals to remain at home or transition to less restrictive community settings, as long as it is safe and their choice" to "Its [the HOPE Waiver] purpose is to reduce unnecessary nursing facility care by supporting individuals to remain at home or transition to less restrictive community settings, as long as it is safe and/or the participant or legal representative's informed choice to assume any additional risks associated with receiving

			services in their home or in the community."
3	One commenter recommended allowing HOPE Waiver services to temporarily resume upon discharge from a rehabilitation stay, even if full eligibility redetermination has not yet been completed, to prevent gaps in services and unnecessary institutionalization.	LTSS appreciates this recommendation. The HOPE Waiver currently includes an established Settings Change process designed to support timely resumption of services for eligible participants returning to the community following a facility stay when waiver level of care remains in effect. Because waiver services may only be authorized for individuals who meet approved eligibility criteria, no waiver modification was made.	None
4	One commenter requested clarification of the in-home respite service definition, expressing concern that the proposed language could be interpreted as prohibiting routine personal care or nursing tasks during the respite period. The commenter recommended revised wording to clarify what tasks are permitted.	LTSS appreciates the commenter bringing this potential ambiguity to our attention and agrees that the service definition should more clearly distinguish allowable respite activities from services that are not covered.	The waiver language has been revised to clarify that short-term personal care and routine supports may be provided during the respite period; however, it is limited to 30 consecutive days. If long-term services are required, other waiver services are explored as needed.
5	One commenter recommended that in-home respite be available to Structured Family Caregiving participants under certain circumstances when remaining at home is in the participant's best interest.	LTSS appreciates this recommendation. Respite services are intended to relieve unpaid caregivers, so the service is not available to participants with a caregiver who is paid through SFC. The HOPE Waiver currently includes mechanisms to support participants enrolled in Structured Family Caregiving when caregiver relief is needed, including access to alternative waiver services (e.g. adult companion, institutional respite)	None

		when appropriate. No waiver modifications were made.	
6	One commenter recommended adding presumptive eligibility and participant self-direction to the HOPE Waiver, citing potential participant benefits and cost savings, and suggested pursuing a separate waiver action if these additions cannot be included in the current renewal.	LTSS appreciates these recommendations. These proposals represent broader program design changes requiring significant policy, systems, fiscal, and operational review and are not included in this renewal application. They may be considered in future waiver development efforts.	None
7	One commenter expressed support for the proposed provider requirements for Structured Family Caregiving, including pre-service activities, six-month home reassessments, and additional monitoring for higher-risk participants.	LTSS appreciates the commenters' support for the proposed HOPE Waiver renewal updates.	None
8	One commenter cautioned against overreliance on informal supports when developing service plans, noting concerns about caregiver stress and sustainability, and requested that case managers carefully consider caregiver burden when authorizing services.	LTSS appreciates this feedback and agrees that person-centered planning should consider participant needs, available supports, health and welfare, and cost-effective service options. Existing service planning standards require individualized review, including consideration of the supports needed to sustain participants safely in the community; therefore, no waiver modification was made.	None
9	One commenter recommended adding home delivered meals as a service option for participants authorized for Structured Family Caregiver, particularly when a participant requires a special diet.	LTSS appreciates this recommendation. Meal planning and meal preparation are a component of the Structured Family Caregiving service; therefore, authorizing home delivered meals in addition to Structured Family Caregiving would be	None

		duplicative. No waiver modification was made.	
10	One commenter expressed concern that individuals aging out of pediatric Medicaid services at age 21 may experience significant reductions in authorized nursing service hours due to the 500-hour limit under adult waiver criteria, potentially creating hardship for families and increasing risk of institutional placement.	LTSS acknowledges that transitions from pediatric benefits to adult long-term services and supports can be challenging; however, LTSS clarified that the HOPE waiver does not limit participants to 500 hours of nursing services. HOPE Waiver participants must access the first 500 hours through the State Plan Personal Care Services. Once 500 hours are depleted, HOPE Waiver may be accessed. HOPE Waiver services are authorized based on waiver eligibility, assessed need, person-centered service planning, and applicable program requirements. No waiver modification was made.	None
11	The same commenter expressed concern about a lack of coordinated guidance and transition support for families navigating the move from pediatric services to adult waiver services.	LTSS recognizes the importance of effective transition planning for individuals moving between pediatric and adult service systems. LTSS will continue working with families, providers, and case management entities to support care coordination and access to available services. No waiver modification was made.	None
12	One commenter asked whether providers would be reimbursed for costs associated with newly required caregiver training.	LTSS appreciates this question. LTSS explained during the public comment call that provider administrative and program support costs, including training-related expenses, are considered within the reimbursement methodology for applicable services; therefore, no waiver modification was made.	None

13	One commenter asked whether provider cost report results would be shared publicly and how cost report data would be used by the state.	LTSS appreciates this question. LTSS explained during the public comment call that cost report information is reviewed as part of established rate-setting and oversight processes, and summary information is available on the Department's webpage. No waiver modification was made.	None
14	One commenter requested clarification regarding whether the proposed SFC home assessment requirements would require providers to change their current nursing assessment process prior to service initiation.	LTSS appreciates this question. LTSS clarified during the public comment call that the intent is to ensure the participant home environment and caregiver readiness are assessed prior to billing for services. Existing provider practices that already meet this expectation would not require substantial revision. No waiver modification was made.	None