

Rhode Island Department Of Behavioral Healthcare,
Developmental Disabilities & Hospitals
DIVISION OF DEVELOPMENTAL DISABILITIES

# **BILLING POLICY MANUAL**

# INTRODUCTION

The Rhode Island Behavioral Healthcare, Developmental Disabilities & Hospitals (BHDDH) Division of Developmental Disabilities (DDD) is responsible for planning, funding, and overseeing a community system of services and supports for adults with intellectual and significant developmental disabilities. We believe that all Rhode Islanders deserve to live happy, healthy, and fulfilling lives. Our work supports efforts across the state to expand opportunity and provide high-quality services for all Rhode Islanders.

The DDD delivers home and community-based services (HCBS) to eligible adults with intellectual and developmental disabilities in accordance with both its statutory requirements and Global Consumer Choice Section 1115 Demonstration Waiver extension. Guided by its commitment to access, quality, and safety, BHDDH funds a system of services that:

- Supports people living in the community stay in charge of their lives
- Allows individuals to spend resources more flexibly
- Aligns resources to individual needs so people get what they need
- Uses a standardized reimbursement process to equally fund different providers for the same services
- Is transparent for all our stakeholders, service recipients, providers, the federal government, the legislature, and our Governor

The HCBS provided to eligible adults with intellectual and developmental disabilities are financed through legislative appropriations. BHDDH authorizes and reimburses the provision of these services by licensed Developmental Disability Organizations (DDOs) through an established fee for service payment model. This payment model was designed to offer the most flexibility and portability to individuals to promote the following:

- Community-based living in the least restrictive settings
- Integrated day and employment support
- Choice for individuals in how they direct their lives

The purpose of this manual is to provide detailed information on:

- Eligibility criteria and assessment processes for individuals seeking support
- Eligibility criteria for providers interested in providing services
- Available services and their corresponding definitions and requirements
- 2023 rate and payment models
- Technical guidance on billing practices for providers

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# **Revisions**

## Revisions 2/16/2024

- 1. Clarified service characteristics of Community-Based Supports.
- 2. Clarified Service Rate Notes for Residential Habilitation/Group Home.

## Revisions 8/11/2023

- 1. Residential section: Added non-congregate billing codes.
- 2. Whole Life SLA: under Billing Codes, the process for payment has changed. The offline process used under enhanced SLA will be continued until new bill codes are available.
- 3. Job Development: Added a bill code for self-directed job development.
- 4. Transportation: Added back the bill code modifiers for Tiers D and E.
- 5. Respite: Removed the daily respite rate. Daily/overnight respite is billed to the hourly respite rate at the cap of 9 hours/day.

# SERVICE DEFINITIONS, RATES, & BILLING CRITERIA

# **SERVICES**

# **Total Budget**

The fixed and flexible budget for the individual covers the following services.

Residential
Shared Living Arrangements
Community Engagement
Transportation
Professional Services
Assistive Technology

# **Add-On Services**

Additional services added to the Individual Budget.

Discovery
Job development
Job coaching and retention
Personal care in the workplace
Home modification
Vehicle modification
Peer-to-Peer Supports
Family-to-Family Supports

# **RESIDENTIAL SERVICES**

In addition to residential habitation/group home, two new options will be added for DD participants, supportive living, and companion room and board. Implementation of these options will begin in Fiscal Year 2024.



# Residential Habilitation/ Group Home

• 24-7 supports



# **Supportive Living (NEW)**

 Affordable housing with intensive coordinated services and support



# Companion Room & Board (NEW)

• Unrelated roomate match for community based support

# **Residential Habilitation/Group Home**

Individually tailored 24/7 supports provided in a home setting that is subject to licensure, to assist with the acquisition, retention, or improvement in skills related to living in the community, personal care, and protective oversight and supervision.

## **Service Characteristics**

- Assist with the acquisition, retention, or improvement in community living skills so the individual resides in the most integrated setting appropriate to his/her needs
- Maximizes participant choice, with individuals able to come and go as they please and have control over their daily schedule, like mealtimes and visitors
- Responsibilities include:
  - Adaptive skill development and assistance with activities of daily living
  - Community inclusion and transportation
  - Adult educational supports
  - Social and leisure skill development
  - Personal care, protective oversight, and supervision

#### Included in Rate

- Includes payments for provider program, administrative, and support coordination costs
- Wages and fringe benefits to the Direct Support Professional (DSP), supervisory staff, professional service providers for medical/behavioral health
- Includes training time, attendance at support coordination meetings, and mileage reimbursement for participant transportation

#### Not Included in Rate

Rate does not include payments for room and board

#### **Service Rate Notes**

Providers can only bill when the individual is in the residence or receiving services overnight, but not when admitted to a hospital setting or other 24-hour setting.

The service rates are based on a 344-day billing year to account for absenteeism such as when someone is hospitalized, on vacation unsupported by agency staff or SLA contractor, or spends the night with family unsupported by agency staff or SLA contractor. Plans that include February 29 in leap years should adjust the units to 345.

To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Billing Codes**

# **Group Home**

Tier	<b>Billing Codes</b>	Modifier	Service Allocation
Tier A	T2033	U5	Per Day
Tier B	T2033	U6	
Tier C	T2033	U7	
Tier D	T2033	UA	
Tier E	T2033	TG	
Supplemental Funding	T2033	L9	Per Day

# Non-Congregate

This service will be ending. Until it does, bill the following codes.

Tier	<b>Billing Codes</b>	Modifier	Service Allocation
Tier A	T2016	U5	Per Day
Tier B	T2016	U6	
Tier C	T2016	U7	
Tier D	T2016	UA	
Tier E	T2016	TG	
Supplemental Funding	T2016	L9	Per Day

# **Supportive Living – NEW SERVICE**

Combines affordable housing with intensive coordinated services and assistance to support the individual with I/DD in living as independently as possible in the community. Residents live in their own units and pay rent. Service providers offer multi-disciplinary supports that are flexible enough to address the individual's needs.

## This service is not yet implemented.

## **Service Characteristics**

- Maximizes participant choice, with individuals able to come and go as they please and have control over their daily schedule, like mealtimes and visitors
- Service providers offer multi-disciplinary supports that are flexible enough to address the individual's needs, including:
  - Adaptive skill development
  - Assistance with activities of daily living
  - Community inclusion
  - Transportation
  - Adult educational supports
  - Social and leisure skill development
  - o Personal care, protective oversight, and supervision as needed
- Staff must be onsite during typical awake hours when residents are present
- Overnight staff may be onsite and awake or asleep, or may be offsite in on-call status if they can provide an onsite response within 15 minutes

## Included in Rate

- Rate does not include payments for room and board, but does include payments for provider program, administrative, and support coordination costs
- Wages and fringe benefits to the Direct Support Professional (DSP), supervisory staff, professional service providers for medical/behavioral health
- Includes training time, attendance at support coordination meetings, and mileage reimbursement for participant transportation

#### **Service Rate Notes**

Providers can only bill when the individual is in the residence overnight.

The service rates are based on a 344-day billing year to account for absenteeism such as when someone is hospitalized, on vacation, or spends the night with family. Plans that include February 29 in leap years should adjust the units to 345.

To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Billing Codes**

To Be Determined

# **Companion Room & Board - NEW SERVICE**

The individual being supported is matched with a roommate who is vetted and approved by an overseeing DDO. The roommate is provided with a stipend and has an occupancy agreement. The roommate may provide supports to the individual through Community-Based Supports.

## This service is not yet implemented.

#### **Service Characteristics**

- Covers defined living expenses of an unrelated individual who does not receive I/DD services
- Individual being supported is matched with a roommate by a DDO or finds their own roommate who is vetted and approved by an overseeing DDO
- The matching process considers shared values, hobbies, and interests, and is driven by the choice of the individual receiving services
- The roommate is provided with a stipend and has an occupancy agreement
- The service is available in a home owned or rented by the individual receiving services and may not be provided in a home owned by a provider organization or the roommate

## **Included in Rate**

 New service to cover the cost of room and board of a companion/roommate living with the individual

## **Service Rate Notes**

- Payment rate will be based on the actual cost of the living arrangement (equal to half of the cost of the home's rental and utility expenses) plus 10 percent for the administrative fee of the agency
- The roommate may also provide supports to the individual through Community-Based Supports
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

# SHARED LIVING ARRANGEMENTS

Shared Living Arrangements (SLA) and the new Whole Life Shared Living supports a person with a developmental disability to live with an individual or family in a home-like setting where people can help with daily activities such as meals, transportation and personal care while providing a positive social environment.





# **Shared Living Arrangement (SLA)**

Individually tailored support option for an individual to reside with and receive supports from someone who has contracted with a shared living placement agency.

#### **Service Characteristics**

- Responsibilities of the Shared Living DDO include:
  - Recruitment and matching of qualified contractors
  - Orientation, monitoring, and ongoing oversight of the SLA placement and adherence to the goals of the ISP
  - Provision of respite services
- Each SLA resource tier has an expected number of annual visits or monitoring calls that providers make to the SLA Contractor as well as the average number of respite hours available for the individual:
  - o Tier A: 21 visits/monitoring calls per year, 300 hours of respite per year
  - o Tier B: 28 visits/monitoring calls per year, 300 hours of respite per year
  - o Tier C: 32 visits/monitoring calls per year, 300 hours of respite per year
  - Tiers D/E: 40 visits/monitoring calls per year, 300 hours of respite per year

## **Included in Rate**

- DDO program and administrative costs
- Wages and fringe benefits of the DDO staff that receive training related to this service, provide training to families, and monitor and conduct visits to SLA Contractor
- Payment for respite services for SLA Contractors
- Transportation costs incurred by the SLA Contractor to support the individual's goals
- DDO administrative costs include, but are not limited to, recruitment, selection, oversight, and costs to perform criminal background and other checks to ensure the integrity of the SLA Contractor and the safety of the individual in the SLA

#### **Not Included in Rate**

• Does not include payments for room and board

#### **Service Rate Notes**

- Providers can only bill when the individual is in the residence overnight.
- The service rates are based on a 344-day billing year to account for absenteeism such as when someone is hospitalized, on vacation, or spends the night with family. Plans that include February 29 in leap years should adjust the units to 345.
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Emergency SLA**

An emergency SLA is a short-term placement that occurs in an emergency outside of the regular SLA matching requirements. It must be renewed every 30 days with a maximum of 90 days. Emergency SLA placements will also be allocated 6 hours of professional services that can be used over the maximum of 90 days.

# **Billing Codes**

## SLA

Tier	Billing	Modifier	Modifier	Service
Tier	Codes	One	Two	Allocation
Tier A	T2033	U1	U5	Per day
Tier B	T2033	U1	U6	
Tier C	T2033	U1	U7	
Tier D	T2033	U1	UA	
Tier E	T2033	U1	TG	
Supplemental Funding	T2033	L9	U1	Per day

# **Emergency SLA**

Tier	Billing Codes	Modifier	Service Allocation
Emergency SLA	S9125		Per day

## **Professional Services at SLA**

Tier	Billing Codes	Modifier 1	Modifier 2	Service Allocation
Professional Services	T2017	UD	U8	15 minutes

Max Daily Billable Units = 32

# **Shared Living Home Provider Rates**

Service	Tier	Daily Rate
SLA Home Provider	Α	\$75.00
SLA Home Provider	В	\$90.00
SLA Home Provider	С	\$105.00
SLA Home Provider	D	\$120.00
SLA Home Provider	Е	\$135.00
Whole Life SLA Home Provider	Α	\$101.25
Whole Life SLA Home Provider	В	\$121.50
Whole Life SLA Home Provider	С	\$141.75
Whole Life SLA Home Provider	D	\$204.00
Whole Life SLA Home Provider	Е	\$229.50

# Whole Life Shared Living Arrangement (WLSLA)

A community-based service where people who live together in a Shared Living Arrangement (SLA) agree to spend most of their time, (in lieu of traditional day supports) actively engaged in their community, participating in community events, and make connections based on the personal goals established in the person's Individual Support Plan (ISP).

#### **Service Characteristics**

- Responsibilities of the DDO include:
  - o Recruitment and matching of qualified contractors
  - Orientation, monitoring, and ongoing oversight of the SLA placement and adherence to the goals of the ISP
  - Provision of respite services
- Responsibilities of the SLA Contractor include all of the same responsibilities of the standard SLA plus services in lieu of traditional day supports
- Each SLA resource tier has an expected number of annual visits or monitoring calls that
  providers make to the SLA Contractor as well as the average number of respite hours
  available for the individual:
  - o Tier A: 21 visits/monitoring calls per year, 300 hours of respite per year
  - Tier B: 28 visits/monitoring calls per year, 300 hours of respite per year
  - o Tier C: 32 visits/monitoring calls per year, 300 hours of respite per year
  - Tiers D/E: 40 visits/monitoring calls per year, 300 hours of respite per year

## **Included in Rate**

- DDO program and administrative costs
- Wages and fringe benefits of the DDO staff that receive training related to this service, provide training to families, and monitor and conduct visits to SLA Contractor
- Payment for respite services for SLA Contractors
- Transportation costs incurred by the SLA Contractor to support the individual's goals
- DDO administrative costs include, but are not limited to, recruitment, selection, oversight, and costs to perform criminal background and other checks to ensure the integrity of the SLA Contractor and the safety of the individual in the SLA

## **Not Included in Rate**

Does not include payments for room and board

## **Service Rate Notes**

- The equivalent of all day supports is provided by the WLSLA home provider. The
  individual cannot also receive other community-based supports in lieu of traditional day
  supports at the same time as receiving Whole Life SLA services.
- Providers can only bill when the individual is in the residence overnight.

- The service rates are based on a 344-day billing year to account for absenteeism such as when someone is hospitalized, on vacation, or spends the night with family. Plans that include February 29 in leap years should adjust the units to 345.
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (<u>Financial Resources: Rate Table</u>).

# **Billing Codes**

Billing codes for this new service are pending. Until they are available, providers should bill the standard SLA codes and payments for the additional amount will continue to be made offline.

# **COMMUNITY ENGAGEMENT**

Services and supports designed to support community engagement include (1) community-based supports and (2) center-based supports. Both programs share the overarching goal of increasing participant independence and inclusion in the community, though they diverge in the location in which services are provided.

# **Center-Based Community-Based Supports Supports** Provided in Provided in any nonresidential setting excluding location controlled provider controlled by provider residential setting **Support** independence and inclusion in the community **Access to Overnight** Supports On-call support during overnight hours for people living in their own homes

# **Community-Based Supports**

Direct support and assistance in or out of the individual's residence intended to achieve and/or maintain increased independence, productivity, enhanced family functioning, and inclusion in the community as outlined in the individual's ISP. Community-Based Supports include previous definitions of community-based supports, prevocational services, community-based day, and in-person response when called upon during access to overnight supports.

## **Service Characteristics**

- Service activities include:
  - Supporting development of problem-solving skills, social skills, adaptive skills, daily living skills, and leisure skills
- Services are scheduled based on the needs of the individual receiving services
- For programs that operate exclusively in the community except for incidental time at a provider-operated "hub" (for example, to have lunch), the time spent at the hub may be billed as Community-Based Supports
- This service cannot be provided at an individual home or other location owned or controlled by the service provider where they reside, including group homes or licensed centers
- Services are not limited by time of day
- Not intended to supplant non-paid natural support
- May be delivered one-on-one to an individual or may be shared with other individuals

## **Included in Rate**

- Provider program and administrative costs, wages and fringe benefits of the DSP that provide the support, supervisory staff when the services are delivered by DSPs
- Includes DSP mileage reimbursement for participant transportation and travel to service location, missed appointments, training time, and attendance at support coordination meetings

## **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
Tier A	T2017	UN	15 Minutes
Tier B	T2017	UP	
Tier C	T2017	UQ	
Tier D	T2017	UR	
Tier E	T2017	US	
1:1 All Tiers	T2017		
Supplemental Funding	T2017	L9	15 Minutes

Max Daily Billable Units = 64

# **Center-Based Day Supports**

Services provided to participants at a licensed nonresidential location controlled by the provider for the provision of education, training, and opportunities to acquire the skills and experience needed to participate in the community.

## **Service Characteristics**

- Service activities include:
  - Supporting the development of problem-solving skills, social skills, adaptive skills, daily living skills, and leisure skills
- Services are scheduled based on the needs of the individual receiving services
- Service cannot be provided at a home owned or controlled by the service provider, including group homes, supportive living programs, or shared living arrangements

## **Included in Rate**

- Wages and fringe benefits of the DSP that provide the support, Supervisory staff when the services are delivered by DSPs
  - Includes transportation to outings, training time, and attendance at support coordination meetings
- Provider program, administrative, and annual facility costs

## **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (<u>Financial Resources: Rate Table</u>).

## **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
Tier A	T2021	T2021 U5	
Tier B	T2021	U6	
Tier C	T2021	U7	
Tier D	T2021	UA	
Tier E	T2021	TG	
1:1 All Tiers	T2021		
Supplemental Funding	T2021	L9	15 Minutes

Max Daily Billable Units = 32

# **Access to Overnight Supports**

Services provided to participants at a licensed nonresidential location controlled by the provider for the provision of education, training, and opportunities to acquire the skills and experience needed to participate in the community.

## **Service Characteristics**

- Provision of direct support to be shared among individuals to assist them to achieve and/or maintain the outcomes of increased independence, productivity, and inclusion in the community
- Access to Overnight Shared Supports is not intended to supplant nonpaid natural supports
- This service is only available to individuals who live independently and not in a BHDDH licensed or unlicensed group home setting
- All staff shall be awake for the duration of the service

## **Included in Rate**

- Wages and fringe benefits of the DSPs that provide the supports
- Wages and fringe benefits of Supervisory staff when Access to Overnight Shared Supports are delivered by DSPs
- Wages and fringe benefits of all staff that provide support for the time worked when staff are not face-to-face with individuals, such as training time and attendance at Support Coordination meetings
- Provider administrative costs

## **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

Tier	<b>Billing Codes</b>	Modifier	Service Allocation
1:1 All Tiers	T2016	U8	Per Day

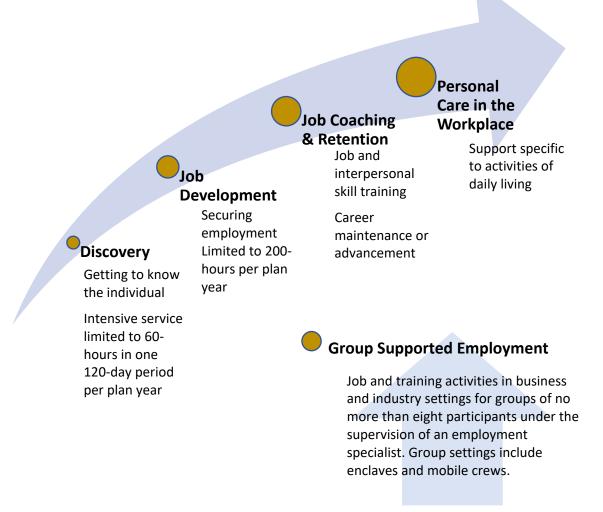
# **EMPLOYMENT**

BHDDH takes an individualized approach when working with participants around career development. BHDDH offers supported employment and customized employment.

The customized employment approach focuses on identifying a person's strengths and creating a profile that is used to target businesses where job seeker's unique characteristics and skills will be seen as assets. The question is not if the person can work, but where will the individual's unique characteristics be valued?

To ensure equitable access to employment, BHDDH offers an array of services across the employment spectrum, from learning about the individual's interests and skills to securing and maintain a position. The service types include: (1) discovery, (2) job development, (3) job coaching and retention, (4) personal care in the workplace, and (5) group supported employment.

All employment services are funded through the add-on budget process.



# **Discovery – NEW SERVICE**

The initial step in a customized approach to employment for someone with significant challenges aimed to better understand the individuals by understanding their strengths, needs, and interests.

# This service is not yet implemented.

#### **Service Characteristics**

- Qualitative process aimed to better understand individuals by getting to know their strengths (potential contributions to employers), needs (the features that need to be in place for success, i.e. ideal work environment), and interests (providing a direction to the type of work that the individual wants to do)
- Meant to be an intensive, focused process, so it is limited to 60 hours in one consecutive 120-day period during a plan year

#### Included in Rate

- Wages and fringe benefits of the DSPs that provide the support and their Supervisors
- Transportation costs incurred by the Job Developer to fulfill job duties
- Provider administrative costs
- Includes DSP mileage reimbursement for participant transportation and travel to service location, missed appointments, training time, reporting time, and attendance at support coordination meetings

## **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

# **Job Development**

Activities to assist individuals in securing employment consistent with their vocational goals. Job Development is limited to 200 hours per plan year.

## **Service Characteristics**

- Activities to assist individuals in securing employment consistent with their vocational goals, including:
  - Job search and matching
  - Coordination of opportunities on behalf of an individual (such as contacting potential employers)
  - Assistance with obtaining a job (such as helping with resumes or planning for interviews)

## **Included in Rate**

- Wages and fringe benefits of the DSPs that provide the support
- Transportation costs incurred by the Job Developer to fulfill job duties
- Provider administrative costs (i.e. services on behalf of job seeker)

## **Service Rate Notes**

• Job Development is limited to 200 hours per plan year

To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Billing Codes**

Individual	Billing Codes	Modifier 1	Modifier 2	Service Allocation
1:1 All Tiers	T2025	UD		Per Hour
All Tiers Self Direction	T2025	UD	U2	_
Supplemental Funding	T2025	L9		Per Hour

Max Annual Billing Units = 200

# **Job Coaching**

Support and structured training for individuals to learn job tasks and adjust to their new role, including learning interpersonal skills necessary to be successful as an employee.

#### **Service Characteristics**

- A job coach may first do a job analysis to identify the job duties, followed by developing
  a specific plan as to how they can best train the employee to work more and more on
  his/her own until completely self-sufficient and able to perform job duties accurately
  and effectively without assistance
- Includes development of a Fade Plan and identifying natural supports
- Job coaching occurs on the job during the individual's shift
- Is not meant to be a permanent service

## **Included in Rate**

- Wages and fringe benefits of the DSPs, Supervisory staff, and job coaches that provide support
- Includes training, attendance at Support Coordination meetings, travel time between individuals being supported, record-keeping/reporting, and supervision
- Provider program and administrative costs

## **Service Rate Notes**

- The job coach must be present at the place of employment to bill for this service; service is delivered face-to-face on the job with individual and job coach
- When provided at work site in which persons without disabilities are employees, payment will be made only for the adaptations, supervision, and training required by individuals receiving waiver services because of their disabilities and will not include payment for the supervisory activities rendered as a normal part of the business
- Cannot be provided or reimbursed for the same hours on the same day as any other employment or waiver service
- Job coaching cannot be billed while providing transportation or at any time other than during the individual's shift
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (<u>Financial Resources: Rate Table</u>).

## **Billing Codes**

Tier	<b>Billing Codes</b>	Modifier	<b>Service Allocation</b>
1:1 All Tiers	T2019		15 Minutes
Self-direct	T2019	U2	
Supplemental Funding	T2019	L9	15 Minutes

Max Daily Billable Units = 32

## **Job Retention**

An employment outcome and support service necessary for a person to maintain or advance in employment consistent with the person's strengths, abilities, capabilities, and interests.

## **Service Characteristics**

- Includes supports necessary to maintain or advance in employment, including communication with the individual and his/her supervisor to ensure job satisfaction and/or promoting employment enhancement
- Includes short-term or intermittent job coaching in response to a change in job duties or in how a job is to be done

#### **Included in Rate**

- Wages and fringe benefits of the DSPs that provide job retention support.
- Wages and fringe benefits of the Job Coaches that provide support at the individual's job site.
- Wages and fringe benefits of all DSPs that provide supports where they are not face-toface with individuals, such as travel time to and from appointments, missed appointments, training and attendance at Support Coordination meetings.
- Support Coordination activities.
- Mileage reimbursement to DSPs while performing job duties.
- Provider program costs and provider administrative costs.

#### **Service Rate Notes**

- If the individual should secure additional job responsibilities or require increased job coaching support, the provider should cease billing job retention and bill job coaching
- Retention cannot be billed at the same time as other supported employment services such as Job Development and Job Coaching
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table)

# **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
Tier A	T2023	U5	Per Month
Tier B	T2023	U6	
Tier C	T2023	U7	
Tier D	T2023	UA	
Tier E	T2023	TG	

# **Personal Support in the Workplace**

A range of personal care and supports during paid competitive community employment hours to enable individuals to be successful in a work environment. The service is available for individuals who do not need job related support but do need assistance with activities of daily living at the job site

## **Service Characteristics**

- A range of personal care and supports during paid competitive community employment hours to enable individuals to be successful in a work environment
- The service is available for individuals who do not need job related support, but do need assistance with activities of daily living (ADLs) (eating, personal hygiene, etc.) at the job site or require 1:1 eyes-on (court orders)

#### Included in Rate

- Wages and fringe benefits of the DSP that provide the support, Supervisory staff when the services are delivered by DSPs
  - Includes DSP mileage reimbursement for participant transportation and travel to service location, training time, and attendance at support coordination meetings
- Provider program and administrative costs

#### **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (<u>Financial Resources: Rate Table</u>).

## **Billing Codes**

The bill code for Personal Care in the Workplace is not yet available. Until it is, use the code below for Community-Based Supports, which has the same rate.

Tier	Billing Codes	Modifier	Service Allocation
1:1 All Tiers	T2017		15-minutes
·			·

# **Group Supported Employment**

Shared supports and structured training for individuals to find employment, learn job tasks and adjust to their new role, including learning interpersonal skills necessary to be successful as an employee.

#### **Service Characteristics**

- Billing will continue to be based on the staffing ratio for groups
- Job coaching occurs on the job during the shift supporting more than one individual

## **Included in Rate**

- Wages and fringe benefits of the DSPs, Supervisory staff, and job coaches that provide support
- Includes training, attendance at Support Coordination meetings, travel time between individuals being supported, record-keeping/reporting, and supervision
- Provider program and administrative costs

## **Service Rate Notes**

- The job developer/coach must be present at the place of employment to bill for this service; service is delivered face-to-face on the job with individuals
- When provided at work site in which persons without disabilities are employees, payment will be made only for the adaptations, supervision, and training required by individuals receiving waiver services because of their disabilities and will not include payment for the supervisory activities rendered as a normal part of the business
- Cannot be provided or reimbursed for the same hours on the same day as any other employment or waiver service
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

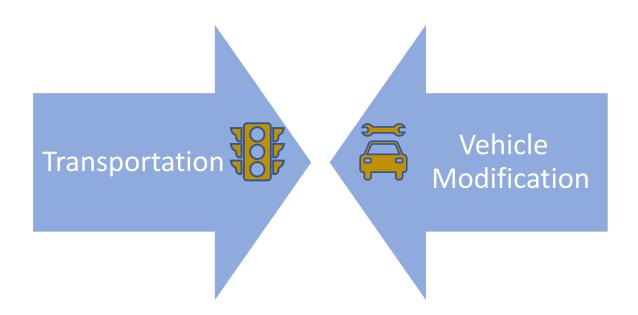
## **Billing Codes**

Ratio	<b>Billing Codes</b>	Modifier	Service Allocation
1:2	T2019	UN	15 Minutes
1:3	T2019	UP	
1:4	T2019	UQ	
1:5	T2019	UR	
1:6	T2019	US	

Max Daily Billable Units = 32

# **TRANSPORTATION**

BHDDH recognizes the barriers individuals can face around transportation to and from appointments, community events, and employment. To mitigate this, individuals can receive (1) transportation and/or (2) vehicle modification services.



# **Transportation**

Transportation provided by a licensed DDO to an individual to and from employment or community activities as defined in the individual's ISP goals. The number of trips is to be determined by the individual based on their plan and individual budget.

## **Service Characteristics**

- When provided by a licensed DDO, transportation can be provided to an individual from his/her residence, or the immediate vicinity thereof, to and from employment or community activities as defined in their ISP goals
- Transportation may also be provided between employment and community activities
- Transportation to various community activities during the course of community-based services or to outings during center-based day programs are included in the payment for those services and do not fall under this service
- In providing these services, the DDO should utilize the most clinically appropriate, least restrictive method of transporting the individual
- For individuals allocating funds directly to The RIde Program, trips can be to/from any employment and community activities/locations as defined in their ISP goals
- DDOs shall make every effort to support individuals with utilizing The RIde Program or any other statewide initiative that is available to transport individuals
- Number of trips are to be determined by the individual based on their plan and individual budget

## **Included in Rate**

- Wages and fringe benefits of the DSPs that provide the service, including their time not face-to-face with the individual and vehicle costs and/or mileage reimbursement to transport individuals
- Provider administrative costs

## **Service Rate Notes**

- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).
- All modifiers have the same rate. Modifiers must be used until code updates are done.

# **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
Tier A, B, C	T2003		Per trip
Tier D	T2003	UA	
Tier E	T2003	TG	
Supplemental Funding	T2003	L9	Per trip

Max Daily Billable Units = 12

# **Vehicle Modifications – NEW SERVICE**

Adaptations or alterations made to the individual's primary vehicle to improve their independence and inclusion in the community.

## This service has not yet been implemented.

## **Service Characteristics**

- The vehicle must be the individual's primary means of transportation, when such modifications are necessary to improve the individual's independence and inclusion in the community
- The vehicle may be owned by the individual, or a family member with whom the individual lives or has consistent and on-going contact

## **Included in Rate**

- Actual amount paid for modification
- Requires prior approval

## **Service Rate Notes**

- The service requires prior approval from BHDDH
- The service may not be used to purchase a vehicle or for general repairs or maintenance
- The service may not be used for vehicles owned or leased by a provider
- Vehicle modifications are limited to \$15,000 every five years

## **Billing Codes**

# **OTHER SUPPORTS**

Additional supports designed to further promote independence and integration in the community include (1) respite, (2) remote support, (3) peer-to-peer supports, (4) family-to-family supports, (5) professional services, (6) assistive technology, and (7) home modifications. Respectively, the services available to individuals under these support types include short-term care to relief caregivers, staff support from remote locations, peer and family led skill development, licensed professional services, performance assistance through a device/product/service animal, and costs for home renovations aimed at improving access.



# Respite

Direct support to individuals furnished on a short-term basis due to the absence of a caregiver or the need for relief of those persons who normally provide care for the individual. Community outings shall be included in the supports provided; and the respite care provider is responsible for providing transportation for community outings.

#### **Service Characteristics**

- Can be delivered in an individual's home, a private place of residence or at the location of a respite care provider or in the community
- Responsibilities include:
  - Ensuring the individual's routine is maintained to attend school, work, or other community activities/outings
  - o Community outings shall be included, with transportation to and from outings

#### Included in Rate

- Wages and fringe benefits of the DSP and Supervisory staff that provide support
- Includes travel time to and from appointments, training time, and mileage reimbursement to travel to the individual's location or transport the individual in the community, as well as provider administrative costs

## **Service Rate Notes**

- Can be billed up to a 24-hour service period (with 9+ consecutive hours of service in a 24-hour period, provider shall bill the Respite Care Daily rate on file)
- Cannot be provided or billed for at the same hours on the same day as Community-Based Supports
- Reallocation is for emergency coverage or coverage for planned vacations within the individual's plan year (reallocation form located on <u>BHDDH website under "Finance</u> Forms: Request to Change Respite Allocation")
- Individuals can be authorized to combine/share the Respite units with Community-Based Supports
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

# **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
1:1 All Tiers (cap at 9-hours, incl. overnight)	T1005		15-minutes
Supplemental Funding	T1005	L9	15-minutes

Max Units = 36

Note: Bill codes for shared respite are not yet available.

# Remote Supports – NEW SERVICE

Provision of supports by staff at a remote location who are engaged with the individual through technology/devices with the capability for live two-way communication. The system must protect the privacy of individuals. Individual interaction with the staff person may be scheduled, on-demand, or in response to an alert from a device in the remote support equipment system.

## This service is not yet implemented.

## **Service Characteristics**

- Equipment used to meet this requirement must include one or more of the following systems:
  - Motion sensing system, radio frequency identification, live video feed, live audio feed, GPS tracking, web-based monitoring system, or a device that otherwise meets the requirement for two-way communication
  - System must protect the privacy of individuals
  - Backup systems are required to ensure support is not interrupted due to inclement weather, power outages or other unforeseen circumstances
- Monitoring devices like cameras cannot be utilized in private living areas like bathrooms or bedrooms
- Individual interaction with the staff person may be scheduled, on-demand, or in response to an alert from a device in the remote support equipment system
- Provider must have the capability to provide an onsite, in-person response within 15 minutes when required either through the use of its own staff or contractual relationships with an in-state DDO

## **Included in Rate**

- Equipment costs, which vary by needs and preferences of the individual
- Provider monitoring time and in-person response when needed

## **Service Rate Notes**

To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

# **Peer Supports - NEW SERVICE**

Support provided by individuals with I/DD who have received approved training on serving as a peer mentor to support the individual being serviced with the development of healthy living, independence, and communication skills.

## This service is not yet implemented.

## **Service Characteristics**

- Provide individuals with a support system to:
  - Develop and learn healthy living skills
  - o Encourage independence and self-determination
  - Link individuals with the tools and education needed to promote their health and wellness
  - Teach the skills that are necessary to engage and communicate with providers and systems of care

## **Included in Rate**

• New service; details TBD

## **Service Rate Notes**

To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

# Family-to-Family Supports - NEW SERVICE

Support provided by a peer who is a primary caregiver to an individual with intellectual and developmental disabilities who has received approved training on serving as a family support to one or more family members of an individual with an intellectual or developmental disability to promote the health and wellness of the individual they care for.

## This service is not yet implemented.

## **Service Characteristics**

- Provided to the family member(s) of an individual by the primary caregiver(s) of someone else with an intellectual or developmental disability
- Service is intended to provide families with the tools and education needed to promote
  the health and wellness of the individual they care for, and to teach the skills that are
  necessary to engage and communicate with providers and systems of care

## **Included in Rate**

New service; details TBD

## **Service Rate Notes**

• To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

# **Professional Services**

Services provided by licensed/certified professionals.

### **Service Characteristics**

- Professional Services include:
  - Licensed psychologist, psychiatrist
  - Licensed social workers, licensed mental health counselors ("LMHCs"), and licensed marriage and family therapists ("LMFTs")
  - o Board certified behavior analyst, board certified assistant behavior analyst
  - Physical therapist, occupational therapist, speech therapist
  - Registered nurses, licensed practical nurses
  - Interpreters
- Billable activities include:
  - Direct support provided to an individual
  - Participating in planning meetings and assessments
  - o Training paid and unpaid caregivers on an individual's service plan
  - Collateral contacts on behalf of an individual

#### **Included in Rate**

• Provision of direct services via face-to-face or telehealth

## **Service Rate Notes**

- DD professional services are to be used when general Medicaid or other insurance will not pay for the service.
- For a nursing care plan or behavior plan, there is a limit of 44 units billed at the relevant rate. Plans written by Behavior Specialists must be reviewed and signed off by a licensed professional and are billed at the interpreter/behavior specialist rate.
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

#### **Billing Codes**

Codes for each profession have not yet been determined. Providers can bill the old codes and rates until the new codes are set up.

Tier	Billing Codes	<b>Modifier One</b>	Modifier Two	Service Units
1:1 All Tiers	T2021	U8		15 Minutes

Max Daily Billable Units = 32

# **Assistive Technology**

An item, piece of equipment or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of beneficiaries, optimize their health, and promote independence and self-care.

## **Service Characteristics**

 A service that directly assists an individual in the selection, acquisition, or use of an assistive technology device

#### **Included in Rate**

- Costs for the technology and for the service costs as described in the definition
- Requires prior approval
- Provider must maintain receipts for the assistive technology purchased and may only bill for the actual amount paid

#### **Service Rate Notes**

- Variable; dependent on equipment/service
- Required pre-approval by BHDDH

# **Billing Codes**

Billing Codes	Modifier	Service Allocation
T5999		Per Service

# **Home Modifications**

Home modifications to remove safety hazards as well as increase usability and access in the home.

#### **Service Characteristics**

- Inclusive of wheelchair ramps, grab bars in bathrooms and hallways, widening doorways, stair lifts, walk-in tubs, removing safety hazards, or other necessary modifications
- Requires prior approval

## **Included in Rate**

• Actual amount paid for modification

## **Service Rate Notes**

• Variable per service

# **Billing Codes**

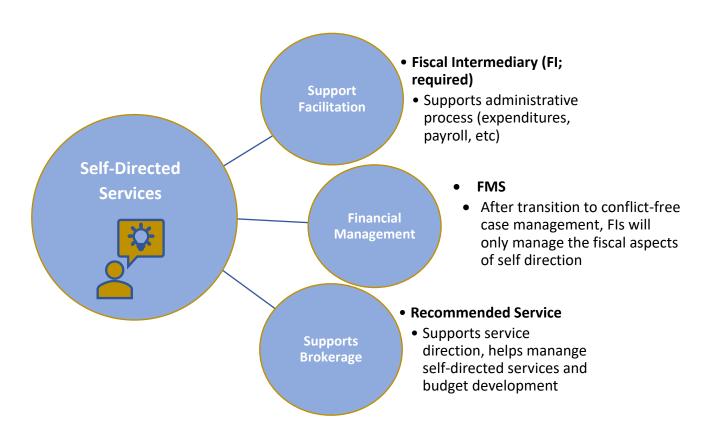
Billing Codes	Modifier	Service Allocation
S5165		Per Service

# **SELF-DIRECTION**

When enrolling in DDD services, the individual has the option to choose the self-directed services pathway. This pathway gives the individual more control and flexibility over the services and supports they want to receive; the individual selects the services and providers of interest as well as determines how to spend their funds. For a comprehensive overview of self-direct services visit the Paul V. Sherlock Center on Disabilities.

BHDDH offers two specialized services to support self-directed individuals: (1) financial management and (2) and supports brokerage. The former involves the required selection and engagement of fiscal intermediary (FI) to oversee the administrative process including payroll and expenditures, whilst the latter is a recommended service to assist with service implementation.

Another service available only to those who self-direct is individual directed goods or services. This includes the provision of assistance and resources to improve independent living, which the FI assists with.



# **Self Direction Guidelines**

The following guidelines apply to self-directed services.

- 1. Spouses can't be paid for providing services under self-direction.
- 2. Parents/guardians can be paid to provide supports.
- 3. The hourly rate for self-directed staff is capped at \$35/hour
- 4. If using Professional Services through self-direction, refer to the Professional Services rates set by the Division of Developmental Disabilities. These rates are the maximum that can be paid for professionals under self-direction.
- 5. There will be a cap on the amount of spending that can be done under goods and services. This cap is still being discussed. Details will be shared once available.

# **Supports Facilitation**

A service provided by Fiscal Intermediaries to individuals who self-direct to empower individuals to define and direct their own personal assistance needs and services and to assist the individual and/or their representative with the financial management of self-directed service. All individuals who choose to self-direct services must have a fiscal intermediary.

#### **Service Characteristics**

- The Support Facilitation Service is managed by a Supports Facilitator.
- The Support Facilitator manages the individual through the administrative side of service planning and delivery process. The Individual Support Plan is submitted through the fiscal intermediary.
- If an individual chooses to self-direct services, then the individual selects a fiscal intermediary who will work with them to complete background verification of potential employees, assists with new hire paperwork, and ensure payment for services rendered in accordance with federal and state rules.

#### **Included in Rate**

- Wages and fringe benefits of the Support Facilitator
- Wages and fringe benefits of other DSPs that participate in Support Facilitation activities or that provide Fiscal Intermediary services
- Transportation costs incurred by the Support Facilitator to fulfill job duties
- Provider administrative costs

#### **Service Rate Notes**

- The fiscal intermediary does not write, monitor, or modify service plans.
- The fiscal intermediary does not help with the recruitment or selection of employees. Their role is limited to the administrative requirements of employment.
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

## **Billing Codes**

Tier	<b>Billing Codes</b>	<b>Modifier One</b>	<b>Modifier Two</b>	<b>Service Allocation</b>
All Tiers	T2022	TG	U2	Month
All Tiers	T2022	UA	U2	Month

#### **Vendor Only**

Tier	Billing Codes	<b>Modifier One</b>	<b>Modifier Two</b>	Service Allocation
All Tiers	T2022	U5	U2	Month

# **Supports Brokerage**

Supports individuals who self-direct in developing the skills necessary to self-direct and facilitate the day-to-day administrative tasks that accompany self-direction. The supports broker acts as an agent of the individual and takes direction from the individual.

#### **Service Characteristics**

- Support broker activities include:
  - Brokering community resources
  - Information and assistance and problem solving
  - Developing and managing budget
  - Training the participant on how to train their hired staff to work with the participant and do the job they were hired to do
- The Supports Broker counsels, facilitates and assists in development of an ISP which includes both paid and unpaid services and supports designed to allow the individual to live in the home and participate in the community.
- A back-up plan is also developed to assure that the needed assistance will be provided in the event of change in regular services identified in the ISP.

#### **Included in Rate**

- Wages and fringe benefits of the Support Broker
- Wages and fringe benefits of other DSPs that participate in Support Brokerage activities
- Transportation costs incurred by the Support Broker to fulfill job duties
- Support Brokerage administrative costs

#### **Service Rate Notes**

- There is a minimum amount (40 units) that is allocated, but individuals can add more funding if they choose
- The self-directed Individual Support Plan is paid out of Support Brokerage (44 units)
- Fiscal Intermediaries are allocated 108 units for activities related to the plan, including amendments, purchase orders, and budget changes.
- The person providing the Supports Brokerage service must meet all training and certification as defined by the state to provide the service and must work with the FI designated by the individual self-directing their services and supports.
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (<u>Financial Resources: Rate Table</u>).

#### **Billing Codes**

Tier	Billing Codes	Modifier	Service Allocation
All Tiers	T2041	U2	15-min

Max Daily Billable Units = 32

# **Individual Goods Or Services**

Individuals who self-direct can use their funding to purchase goods and services designed to meet disability-related needs, such as the provision of assistance and resources to improve and maintain health and wellbeing.

#### **Service Characteristics**

- Includes services, equipment, and supplies not otherwise provided that address an identified need, are part of the ISP, and meet at least one of the following requirements:
  - Decrease the need for other Medicaid services
  - Promote inclusion in the community
  - o Increase the individual's ability to perform activities of daily living
  - o Increase the individual's safety in the home environment
  - o Alternative funding sources are not available
- Providers must meet all training and certification required by the state and must work with the individual's FI
- Can only be authorized through self-directed plans if not available through other funding sources such as health coverage

#### Service Rate Notes

- The FI will maintain receipts for all goods purchased to substantiate the purchase and can only bill for the actual amount paid
- Requests for goods and services must:
  - o Be submitted with, and documented in, the annual ISP
  - Have a clear connection to the individual's identified and established goals
  - o Be drawn from an individual's allocated resource package
- Requests can be made outside of the annual plan in the event of an emergency or exceptional need for a plan modification
- Substitutions may be made within the budget category with a similar or related alternative that is within the original budgeted amount for that item
- To access the annual rates, visit the BHDDH website under the "Forms, Policies, and Brochures" tab (Financial Resources: Rate Table).

#### **Billing Codes**

Good/Service	<b>Billing Codes</b>	Modifier	Service Allocation
All Tiers	T2025	U2	Per Hour or Per Unit

Max Allowed = To Be Determined

# Individual Directed Goods or Services Guidance

The unit to bill for Individual Directed Goods or Services is per hour (for services) or per item (for goods).

Individuals providing Individual Directed Services shall meet all training and certification as defined by the state to provide the service and must work with the I designated by the self-directed individual.

For Individual Directed Goods, the FI shall maintain receipts for all goods purchased as backup to substantiate the purchase. The FI may only bill for the actual amount paid for the goods.

- 1. Individual Directed Goods or Services shall mean and include the provision of assistance and resources to individuals with developmental disabilities and their families to improve and maintain opportunities and experiences in living, working, socializing, recreating, and personal growth, safety, and health.
- 2. Individual directed goods or services are services, equipment supplies, not otherwise provided in these regulations or through the Medicaid State Plan that address an identified need and are in the approved individualized service plan and meet the following requirements:
  - a. The item or service would decrease the need for other Medicaid services; and/or promote inclusion in the community; and/or
  - b. The item or service would increase the individual's ability to perform activities of daily living; and/or
  - c. Increase the individual's safety in the home environment; and/or
  - d. Alternative funding sources are not available.

Under Medicaid rules, individuals who self-directed their services can use their funding allocation not only to hire DSPs, but also to purchase other goods and services designed to meet disability-related needs.

The following list provides information on allowable and not allowable requests for goods and services:

- Requests for goods and services must: o be submitted with and documented in the annual ISP
  - have a clear connection to the individual's identified and established goals
  - be drawn from an individual's allocated resource package
- Requests can be made outside of the annual plan in the event of an emergency or exceptional need for a plan modification.
- Goods and Services can only be authorized through self-directed plans if not available through other funding sources such as health coverage.
- Substitutions to the goods and services approved in an annual budget may be made within the budget category with a similar or related alternative that is within the original budgeted amount for that item.

• For example, if a specific lifelong learning class is budgeted, but the individual elects to attend a different class, this is allowable without submitting a formal budget modification. If the alternate class costs more, this will require a modification.

## **Examples of Allowable Self-Directed Goods and Services:**

- Transportation for covered service-related activities
- Health coverage for employees
  - Should not exceed \$4,200 annually or \$350 per month
- Therapeutic services funded discretely or in conjunction with a health club membership
  or other allowable services. Allowable therapies or therapeutic services include, but are
  not limited to, physical therapy, occupational therapy, speech therapy, personal
  training, hippotherapy, or other therapy that meets all the following conditions: o Helps
  an individual physically, socially, or emotionally
  - Is recognized and provided by a Certified or Licensed practitioner
  - Is tied to specific goals in the individual's ISP
  - Is recommended and documented by a physician as a current need
- Health club memberships and other fees (e.g. classes, personal trainer sessions, etc.)
  - Should not exceed \$1200 per year
  - Do not require a physician's note
- Memberships to organizations when there is a clear connection to an outcome measure listed in the individual's ISP
- Specialized equipment and/or assistive technology that will enable or support an individual's independence, functionality, and/or increased access to the community
- Lifelong learning that is not associated with college credits o Note: Documentation of the requirement of materials necessary for participation in the class must be provided to use allocated funds to purchase the materials.
- Employee Wages and Taxes directly related to support services
- Support Brokerage & Administrative Fees (Workers Compensation, Plan Development)
- Trainings that are related to the individual's overall health, safety, or community participation

#### **Examples of Non-Allowable Self-Directed Goods and Services:**

- Food
- Housing costs, including utilities or maintenance related expenses
- Prescriptions or co-payments for covered medical services, including eyeglass frames or contact lenses
- Experimental or prohibited treatments

# **FUNDING & BILLING**

# **Supplemental Funding**

Individuals can apply for supplemental funding through the S106 and S109 process. This funding is for the exceptional needs of an individual and can include any flexible or fixed budget service but excludes add-on services (i.e. employment supports). Criteria for S106 or S109 includes:

## S106 (also referred to as L9):

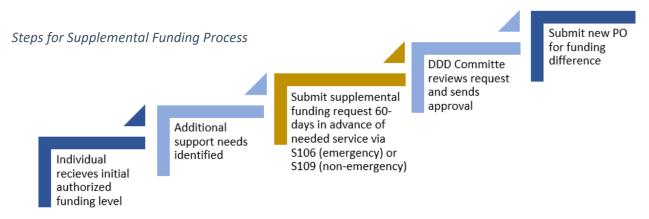
- An emergency/crisis in the individual's living situation
- Risk of losing living situation
- Risk of life-threatening incidents
- Repeated incidents relating to the individual's health and safety
- A new diagnosis of mid-stage organic brain syndromes
- A new diagnosis of serious mental health condition
- Development of new co-morbid conditions
- Development of significant health or medical condition

## S109 (also referred to as L9):

 Non-emergency request for supplemental needs that directly relates to the imminent health and safety needs of an individual that cannot be met with the initial funding

Supplemental funding requests must be submitted at least 60 days prior to the requested start date of these services. The <u>\$106 and \$109 forms</u> can be found on the BHDDH website, and should be submitted via email to <u>bhddh.s109@bhddh.ri.gov</u>. The DD Committee reviews requests on a weekly basis. Once approved, a decision for \$106 is an \$107 and a decision for \$109 is an \$110.

Of note, should an S106 or S109 lead to an approved change in funding, an S107 or S110 will be sent to the individual. This will require submission of a new PO to reflect the approved funding. The BHDDH <u>L9 Conversion Worksheet</u> can be used as a reference to determine the funding difference.



# **Billing**

# **Claim Requirements**

Providers will only be reimbursed for services delivered. They are required to maintain documentation to support the services and units billed. BHDDH reserves the right to review any documentation of the amount, duration and scope for the services rendered to an individual through on-site or desk reviews. Failure to provide adequate supporting documentation for services rendered may result in remittance of payments back to BHDDH recovered by means of a withhold against a future payment.

Please see below for examples documentation requirements by service category:

**Community Based Supports**: Employee timesheet, progress report, attendance sheet with individual's signature

**Job Coaching and Retention**: Employee timesheet, progress report, attendance sheet with individual's signature

Job Development: Employee timesheet, progress report

**Supports Brokerage/Self Directed**: Progress report, attendance sheet with individual's signature

**Respite Care**: Employee timesheet, progress report, attendance sheet with individual's signature

**Assistive Technology**: original receipts along with BHDDH approval

**SLA:** The Shared Living DDO shall retain documentation to support the minimum amounts to be paid to SLA contractors including the number of annual visits and monitoring calls. Documentation to include: Client name, date of visit or call, documentation of payment to SLA contractor.

Service logs are to include Name of Client, Date of Service Delivery, in-out times, activities performed, location of service, and client signature per Medicaid rules and for HCBS Internal records Review for Providers. Timesheets collected from staff must be reviewed for accuracy and signed by participant.

EOHHS has time limits for filing claims. All Medicaid claims must be received within 365 days of the first service to be accepted for processing and payment. If the individual has other insurance and the claim is past the 365-day limit, then an exception will be allowed to process the claim if the other insurance Explanation of Benefits (EOB) is within the past 90 days. Claims filed past the 90 days will require BHDDH approved paper claim to be filed to Gainwell. All paper claims and documentation should be mailed to: *Gainwell, PO Box 2010, Warwick, RI 02887-2010*.

Please refer to the <u>EOHHS Provider Reference Manual</u> for detailed billing guidelines and to the BHDDH Documentation of Services guidance for more information.

## **Recoupment of Claims**

Recoupments may be requested by BHDDH for several different circumstances:

- Individual has been evaluated to have a higher Support Intensity Scale (SIS) Tier at which time the agency will need to recoup the billing in the date range effective by the increase in Tier
- Individual transfers to another agency and services were over billed by the original agency
- Individual provides late notification of service closure and the agency's billing date range does not align with the closure date
- Audit finding by BHDDH
- Error in original billing identified by the agency
- Occasions when it is necessary for the agency to recoup the full amount paid by EOHHS
- The Claim Recoupment Request Form can be used to recoup an overpayment by EOHHS

Recoupments are deducted from the next Medicaid payment. For information on processing electronic Replacement/Void Claims for recoupments, please refer to the <u>EOHHS Provider</u>

<u>Reference Manual</u> or the <u>EOHHS RI Medicaid Provider Training Days</u> presentation.

Once the recoupment is processed by Gainwell, an Electronic Replacement, Remittance Advice (RA) is sent to the agency. The RA is the official documentation needed for verification of recoupment. The agency will email the RA to the BHDDH Fiscal Department for review and to make the necessary adjustments to the authorized services.

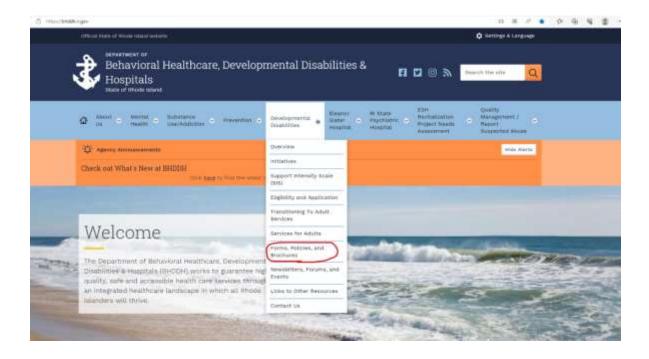
# **APPENDIX**

# **Final Rate Models**

Visit the BHDDH website to access the annual rates using this link: https://bhddh.ri.gov/developmental-disabilities/forms-policies-and-brochures

To navigate to the page, follow these instructions:

- 1. Enter https://bhddh.ri.gov/ into your browser
- 2. Select "Developmental Disabilities" on the top banner then "Forms, Policies, and Brochures" (see image below)
- 3. You will be brought to a new page; scroll down the page until you find "Financial Resources" and click "Rate Table"



# **FAQs**

#### 1. What is a DDO?

**ANSWER:** "Developmental disability organizations" or "DDOs" means an organization licensed by BHDDH to provide services to adults with disabilities, as provided herein. As used herein, DDOs shall have the same meaning as "providers" or "Organizations." TITLE 212 – DEPARTMENT OF BEHAVIORAL HEALTHCARE, DEVELOPMENTAL DISABILITIES, AND HOSPITALS CHAPTER 10 – LICENSING AND GENERAL ADMINISTRATION (section 1:3 24)

# 2. When to submit an Individual Support Plan (ISP)?

**ANSWER:** The ISP needs to be completed and submitted to BHDDH 45 days in advance of the end of the individual's plan year.

## 3. Does the Interim Individual Support Plan (IISP) cover all services?

**ANSWER**: YES, it must cover all services. The IISP is interim coverage for 90 days. Agencies need to submit an ISP to continue services prior to the end of 90-day IISP.

# 4. Do we need to submit an ISP and Purchase Order (PO) when there is a change in the services, residential status, or agency?

**ANSWER**: The ISP belongs to the participant and can follow the participant to a new service provider. If a service or provider is being changed or added, an ISP Amendment Form can be submitted detailing the change. If the participant wants a new plan, a new plan can be done instead of an amendment. A new PO is needed whenever there is a new or change in service or provider, or if funds in the budget are being shifted between services.

#### 5. Does the PO need to be signed?

**ANSWER**: YES – the individual and/or guardian and all agencies need to sign the PO.

#### 6. What is the length of time for a PO?

**ANSWER**: The PO submitted with an ISP must match the ISP plan year. Revised POs submitted during a plan year cannot extend beyond the end of the ISP plan year.

# 7. Can agencies move unused units or dollars from one service to another without submitted a new PO?

ANSWER: NO.

# 8. When does an individual's plan year change?

**ANSWER**: The plan year changes after a gap in services to reflect the new start date.

#### 9. Where are the forms located?

**ANSWER**: Forms | Dept. of Behavioral Healthcare, Developmental Disabilities, and Hospitals (ri.gov)

## 10. Where do I submit my completed S-106/ S109 forms and required documents?

ANSWER: BHDDH.S109@bhddh.ri.gov

## 11. Can I backdate request for additional funding?

**ANSWER**: No, the division will not accept any requested backdates for authorizations. Those with prior written approval from the Administration will not be considered as backdated.

# 12. Can self-directed funds be utilized to pay for an applicant's (employee's) drug test?

**ANSWER**: NO. The test should be paid by the applicant's (employee's) health insurance, or out-of-pocket.

## 13. Can we give bonuses to self-direct staff if the individual's funding has not been exhausted?

**ANSWER**: NO, but you can increase the staffing hourly rate as long as the increase rate does not exceed the BHDDH posted rate.

# 14. Can you bill less than 15 minutes?

ANSWER: NO. You need to bill the allowable billable unit, which is indicated on the BHDDH Rate Model. (Example: if the service shows Billing Unit of 1 hour, you cannot bill ½ hour, if the Billing Unit is Per Day, you cannot bill ½ day, if the service Billing Unit is 15 Minutes, you cannot bill 1-14 Minutes).