



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

# **BILLING POLICY MANUAL**

draft update 9/10/24

Revised //2024

# 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
- Current rate and payment models
- Technical guidance on billing practices for providers

# TABLE OF CONTENTS

INTRODUCTION.....	1
Revisions.....	4
SERVICE DEFINITIONS, RATES, & BILLING CRITERIA.....	5
SERVICES.....	5
RESIDENTIAL SERVICES.....	6
Residential Habilitation/Group Home.....	7
Supportive Living – NEW SERVICE.....	9
Companion Room & Board – NEW SERVICE.....	<b>Error! Bookmark not defined.</b>
SHARED LIVING ARRANGEMENTS.....	11
Shared Living Arrangement (SLA).....	12
Whole Life Shared Living Arrangement (WLSLA).....	14
COMMUNITY ENGAGEMENT.....	17
Community-Based Supports.....	18
Center-Based Day Supports.....	20
Access to Overnight Supports.....	21
EMPLOYMENT.....	22
Job Exploration – NEW SERVICE.....	23
Discovery – NEW SERVICE.....	24
Job Development.....	25
Job Coaching.....	26
Job Retention.....	27
Personal Support in the Workplace.....	28
Group Supported Employment.....	29
TRANSPORTATION.....	30
Transportation.....	31
Vehicle Modifications – NEW SERVICE.....	32
OTHER SUPPORTS.....	33
Respite.....	34
Remote Supports – NEW SERVICE.....	35
Peer Supports – NEW SERVICE.....	36
Family-to-Family Supports – NEW SERVICE.....	37

Professional Services.....	37
Assistive Technology.....	41
Home Modifications.....	42
<b>SELF-DIRECTION .....</b>	<b>43</b>
Self Direction Guidelines.....	44
Supports Facilitation .....	46
Supports Brokerage .....	47
Individual Goods Or Services .....	48
<b>FUNDING &amp; BILLING .....</b>	<b>52</b>
Supplemental Funding .....	52
Billing.....	53
Claim Requirements.....	53
<b>APPENDIX.....</b>	<b>55</b>
Final Rate Models.....	55
<b>FAQs.....</b>	<b>56</b>

DRAFT

# Revisions

## Revisions 8/23/2024

1. Updates to billing codes.
2. Updates to Shared Living Arrangement and Whole Life Shared Living service characteristics to address vacations.
3. Updates to Professional Services with new codes.
4. Updates to definitions and service characteristics for employment services, including the addition of job exploration.
5. Updates to Self-Direction guidelines and addition of chart with self-direct codes for all services.

## Revisions 2/16/2024

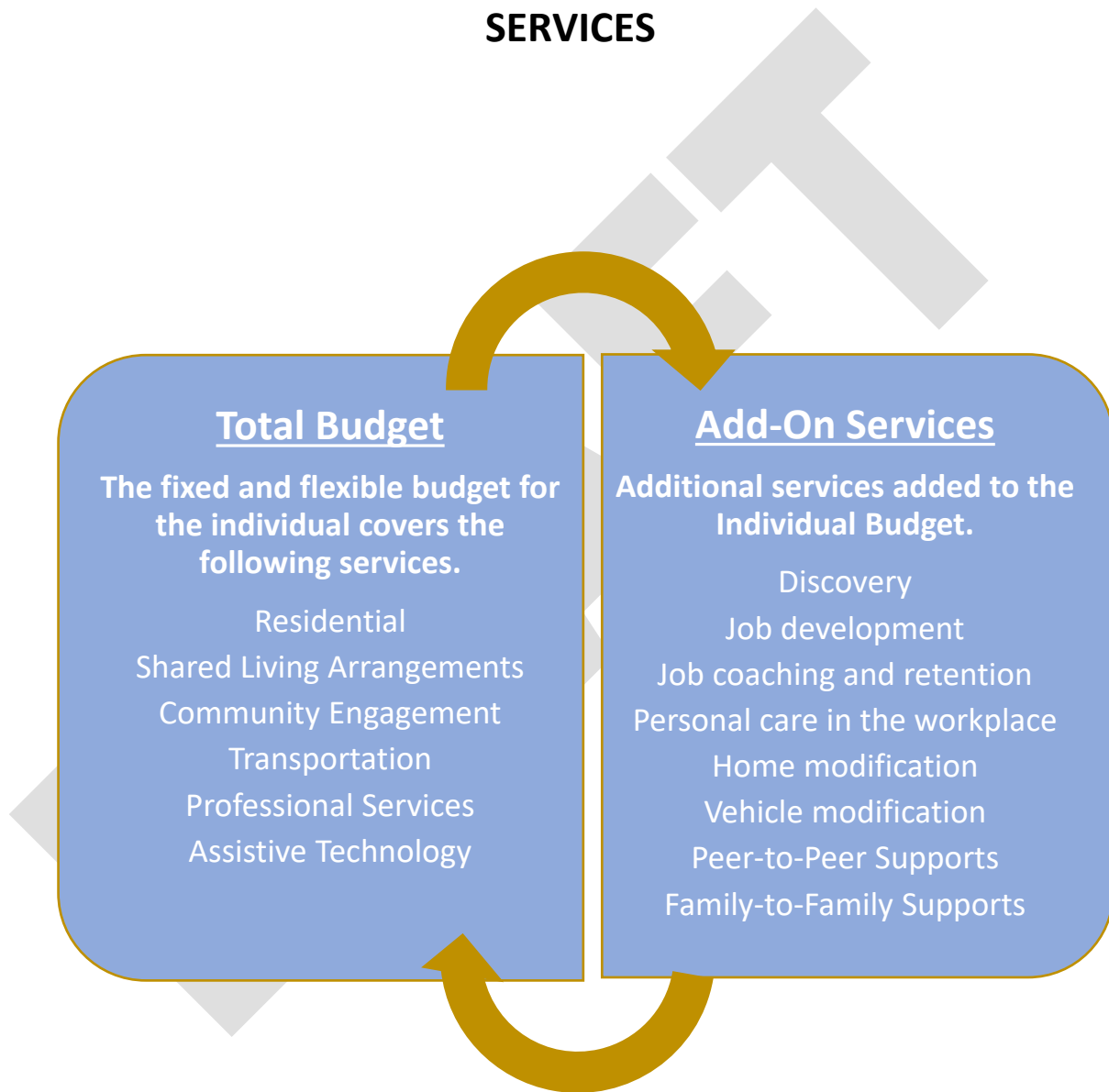
1. Clarified service characteristics of Community-Based Supports.
2. Clarified Service Rate Notes for Residential Habilitation/Group Home.

## 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



## 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

## 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, such as when on vacation with the provider, 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**

<b>Tier</b>	<b>Billing Codes</b>	<b>Modifier</b>	<b>Service Allocation</b>
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.

<b>Tier</b>	<b>Billing Codes</b>	<b>Modifier</b>	<b>Service Allocation</b>
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

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.

### 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
  - 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**

<b>Tier</b>	<b>Billing Codes</b>	<b>Modifier One</b>	<b>Modifier Two</b>	<b>Service Allocation</b>
Tier A	H0043	U5		Per day
Tier B	H0043	U6		
Tier C	H0043	U7		
Tier D	H0043	UA		
Tier E	H0043	TG		

DRAFT

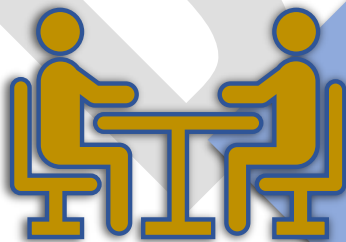
## SHARED LIVING ARRANGEMENTS

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

- Individually tailored support from someone contracted with an SLA agency



### Whole Life SLA

- Individually tailored support from someone contracted with an SLA agency that includes supports in lieu of traditional day services

## 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 agency.

### Service Characteristics

- Responsibilities of the Shared Living DDO include:
  - Recruitment and matching of qualified contractors
  - Orientation, monitoring, and ongoing oversight of the SLA Contractor and adherence to the goals of the ISP
- Availability of respite services for the SLA contractor
- Each SLA resource tier has an expected number of annual visits or monitoring calls that providers make to the SLA Contractor, participant, family, DD social caseworker, community-based supports or other collaterals, as well as the average number of respite hours available for the individual:
  - 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
  - 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 and the participant
- Transportation costs incurred by the SLA Contractor to support the individual's goals
- DDO administrative costs include, but are not limited to, recruitment, selection, and oversight 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.
  - Room and board for SLA is capped at two-thirds of the monthly standard Rhode Island SSI payment.
- Respite is paid separately
- Transportation to/from the participant's place of work, or BHDDH-funded center-based day program or community-based supports

### Service Rate Notes

- Providers can only bill when the individual is in the residence or receiving services overnight, such as when on vacation with the SLA contractor, 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, 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

#### SLA

Tier	Billing Codes	Modifier One	Modifier Two	Service 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

### Shared Living Home Provider Rates

Service	Tier	Daily Rate
SLA Home Provider	A	\$75.00
SLA Home Provider	B	\$90.00
SLA Home Provider	C	\$105.00
SLA Home Provider	D	\$120.00
SLA Home Provider	E	\$135.00

## Whole Life Shared Living Arrangement (WLSLA)

A community-based service where people who live together in a Whole Life Shared Living Arrangement (WLSLA). WLSLA contractors 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

### Service Characteristics

- Responsibilities of the DDO include:
  - Recruitment and matching of qualified contractors
  - Orientation, monitoring, and ongoing oversight of the WLSLA and adherence to the goals of the ISP
- Availability of respite services for the SLA Contractor
- Responsibilities of the WLSLA Contractor include all of the same responsibilities of the standard SLA plus services in lieu of traditional day supports
- WLSLA Contractors must provide the full array of services and cannot delegate the responsibilities to others.
- Each WLSLA 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:
  - 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
  - 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 WLSLA Contractor
- Transportation costs incurred by the WLSLA 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 WLSLA Contractor and the safety of the individual in the WLSLA

### Not Included in Rate

- Payments for room and board
  - Room and board for WLSLA is capped at two-thirds of the monthly standard Rhode Island SSI payment.
- Respite
- Transportation to/from the participant's place of employment

### 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 or receiving services overnight, such as when on vacation with the WLSLA contractor, 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, 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

#### WLSLA

Tier	Billing Codes	Modifier One	Modifier Two	Modifier Three	Service Allocation
Tier A	H2016	U1	US		Per day
Tier B	H2016	U1	UR		
Tier C	H2016	U1	UQ		
Tier D	H2016	U1	UP		
Tier E	H2016	U1	UN		

### Shared Living Home Provider Rates

Whole Life SLA Home Provider	A	\$101.25
Whole Life SLA Home Provider	B	\$121.50
Whole Life SLA Home Provider	C	\$141.75
Whole Life SLA Home Provider	D	\$204.00
Whole Life SLA Home Provider	E	\$229.50



## 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 per month. Emergency SLA have access to 25 hours a month of respite.

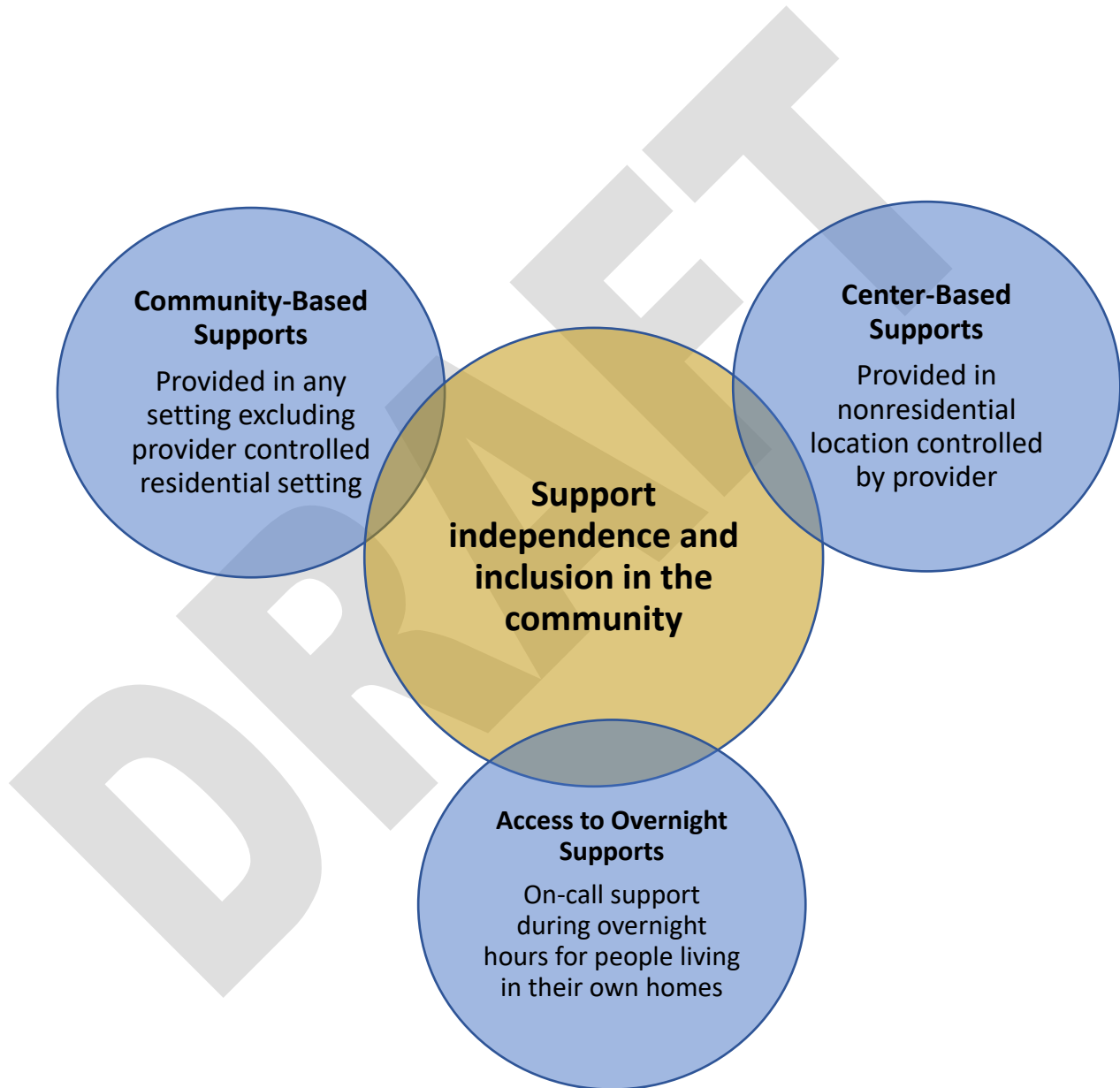
### Emergency SLA

Tier	Billing Codes	Modifier	Service Allocation
Emergency SLA	S9125		Per day

DRAFT

## 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.



## 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	US	15 Minutes
Tier B	T2017	UR	
Tier C	T2017	UQ	
Tier D	T2017	UP	
Tier E	T2017	UN	
1:1 All Tiers	T2017		
Supplemental Funding	T2017	L9	15 Minutes

**Max Billable Units per Day = 96**

DRAFT

## 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 ([Financial Resources: Rate Table](#)).

### Billing Codes

Tier	Billing Codes	Modifier	Service Allocation
Tier A	T2021	U5	15 Minutes
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 Billable Units per Day = 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	Billing Codes	Modifier	Service Allocation
1:1 All Tiers	T2016	U8	Per Day

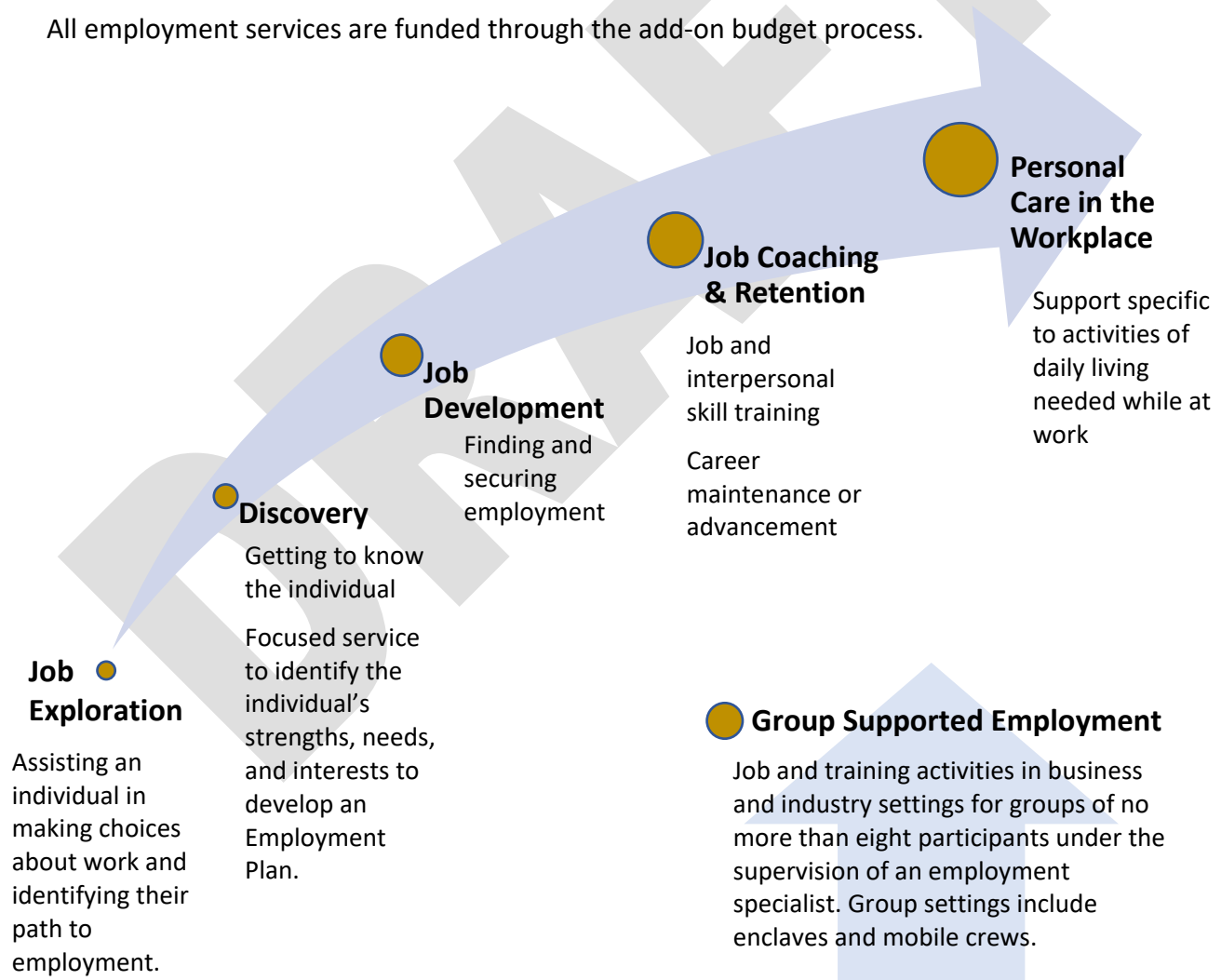
# EMPLOYMENT

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) job exploration (2) discovery, (3) job development, (4) job coaching and retention, (5) personal care in the workplace, and (6) group supported employment.

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



## Job Exploration

Job Exploration is a service to support individuals at the start of their employment journey. The intended target for this service are individuals (usually with moderate-significant support needs) who have had minimal (if any) exposure to work. It is meant to assist an individual in making choices about work and identifying their path to employment.

### Service Characteristics

This service will engage the individual in exercising choice and determining their preferred conditions of work while developing their interests and identifying a path to employment.

Activities that are part of this service include:

- Assist in determining work tolerance
- Build or engage in employment exploration through volunteerism (limited opportunities to expand knowledge of opportunities and/or to try out certain skills)
- Engage in Community and Relationship Mapping
- Engage in Travel Training
- Explore technology that can assist in securing or maintaining employment
- Requires trained staff

Note: Job Exploration is not part of a pre-employment customized employment process, is not pre-vocational services, and does not need to be provided by a certified employment specialist.

### Included in Rate

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

Tier	Billing Code	Service Allocation
1:1 All Tiers	TBD	15-minutes



## Discovery

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.

### Service Characteristics

- Requires certified staff
- 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 a focused process, so there should be an Employment Plan that describes what the focus will entail with detailed goals and objectives and timeframes associated with the tasks.

### Included in Rate

- Wages and fringe benefits of the staff who provide the support and their Supervisors
- Transportation costs incurred by the Job Developer to fulfill job duties
- Provider administrative costs
- Includes staff 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

Tier	Billing Code	Modifier	Service Allocation
1:1 All Tiers	H2023		15-minutes
1:1 All Tiers Self-Directed	H2023	U2	15-minutes

**Max Units = 32**

## Job Development

Activities to assist individuals in securing employment consistent with their vocational goals.

### Service Characteristics

- Requires certified staff
- 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)
  - Detailed in an Employment Plan

### Included in Rate

- Wages and fringe benefits of the certified staff who 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

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	

## 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

- Job analysis to identify the job duties, followed by developing specifics and detailing them in the supported employment 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.
- Identifying natural supports or other assistance such as technology to support the individual to be as independent as possible.
- Job coaching occurs on the job during the individual’s shift
- Requires certified staff

### Included in Rate

- Wages and fringe benefits of the Supervisory staff, and certified 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 at the same time as Job Retention or Group Supported Employment
- 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 ([Financial Resources: Rate Table](#)).

### Billing Codes

Tier	Billing Codes	Modifier	Service Allocation
1:1 All Tiers	T2019		15 Minutes
Self-direct	T2019	U2	

**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
- Requires certified staff

### Included in Rate

- Wages and fringe benefits of the certified staff who 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 staff that provide supports where they are not face-to-face 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 staff 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 Job Coaching or Group Supported Employment
- 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 ([Financial Resources: Rate Table](#)).

### 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	H2025		15-minutes
All Tiers Self-Direct	H2025	U2	

**Max Daily Billable Units = 40**

## 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
- Requires certified staff

### Included in Rate

- Wages and fringe benefits of the Supervisory staff and certified job coaches who 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 Job Coaching or Job Retention
- To access the annual rates, visit the BHDDH website under the “Forms, Policies, and Brochures” tab ([Financial Resources: Rate Table](#)).

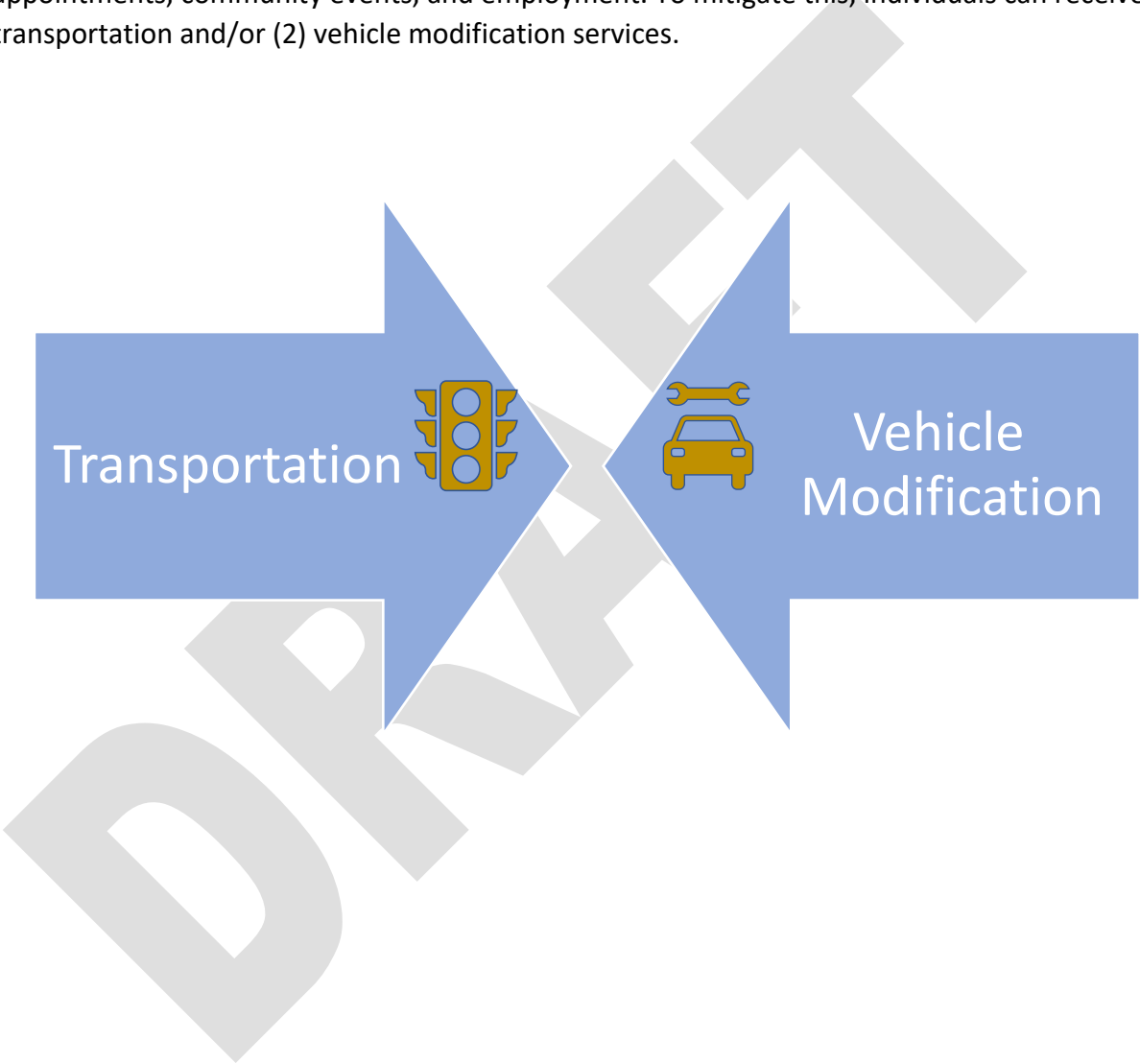
### Billing Codes

Ratio	Billing Codes	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 or SLA/WLSLA Contractor 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 or SLA/WLSLA Contractor, 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
- Transportation cannot be billed at the same time for transportation provided under community-based services or to outings during center-based day programs
- In providing these services, the DDO or SLA/WLSLA Contractor 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 and SLA/WLSLA Contractors shall make every effort to support individuals to use The Ride Program or any other statewide initiative 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 staff who 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
All Tiers	T2003		Per trip
All Tiers Self-Direct	T2003	U2	
Supplemental Funding	T2003	L9	Per trip

**Max Daily Billable Units = 12**



## Vehicle Modifications

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

### 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

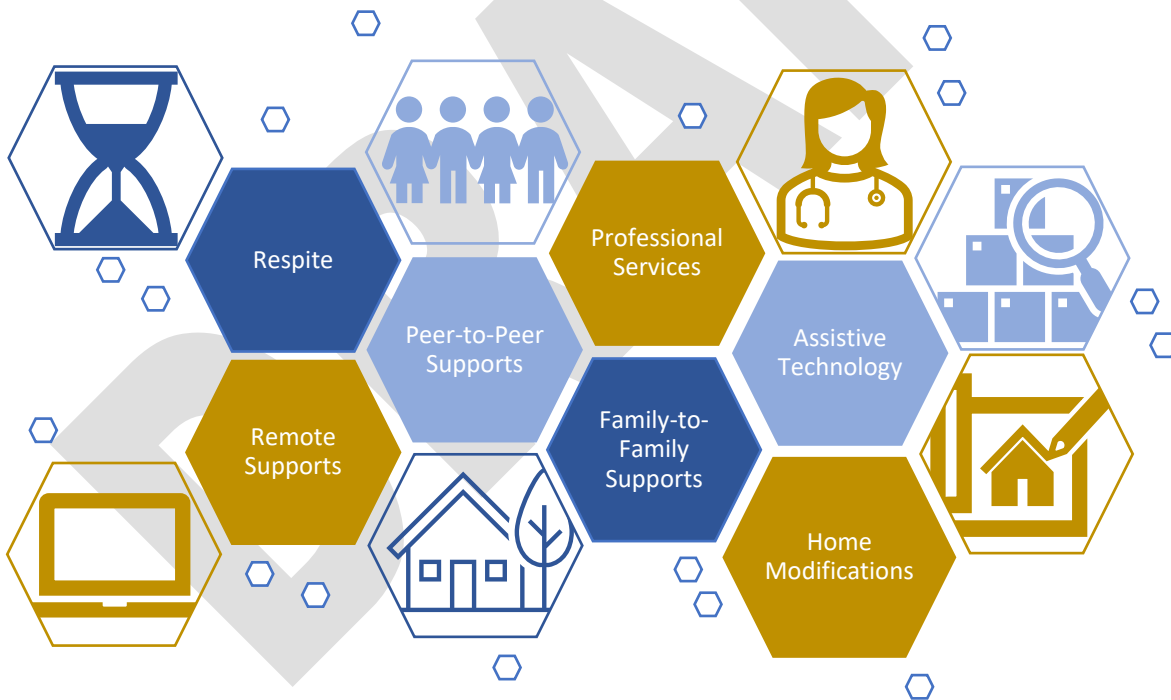
### Billing Codes

Tier	Billing Code	Service Allocation
1:1 All Tiers	T2039	As billed

**Limit = \$5,000**

## 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
  - 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 maximum of 9 consecutive hours of service in a 24-hour period.
- Cannot be provided or billed for at the same hours on the same day as 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 <i>(cap at 9-hours, incl. overnight)</i>	T1005		15-minutes
All Tiers Self-Direct <i>(cap at 9-hours, incl. overnight)</i>	T1005	U2	
Supplemental Funding	T1005	L9	

**Max Units per Day = 36**

## Remote Supports

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.

### 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

Tier	Billing Codes	Service Allocation
	TBD	

## Peer Supports

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.

### Service Characteristics

- Provide individuals with a support system to:
  - Develop and learn healthy living skills
  - 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

Tier	Billing Codes	Service Allocation
1:1 All Tiers	H0038	15-minutes

**Max Units per Day = 16**

## Family-to-Family Supports

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.

### 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

Tier	Billing Codes	Service Allocation
1:1 All Tiers	H2014	15-minutes

**Max Units per Day = 16**

## 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”)
  - 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
  - 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

Note: All Max Units are per day.

Service Type	BHDDH Service	Tier	HCCP	Billing Unit	Max Units
Community/SD	Professional Services - Psychologist	All	90791 U5 U2	15 minute	32
Telehealth/SD	Professional Services - Psychologist	All	90791 U6 U2	15 minute	32
Community	Professional Services - Psychologist	All	90791 U5	15 minute	32
Telehealth	Professional Services - Psychologist	All	90791 U6	15 minute	32
Community/SD	Professional Services - Psychiatrist	All	90792 U5 U2	15 minute	32
Telehealth/SD	Professional Services - Psychiatrist	All	90792 U6 U2	15 minute	32
Community	Professional Services - Psychiatrist	All	90792 U5	15 minute	32
Telehealth	Professional Services - Psychiatrist	All	90792 U6	15 minute	32
CSW/Community /SD	Professional Services - 30 Minutes	All	90832 AJ U5 U2	30 minute	1
CSM/Telehealth/SD	Professional Services - 30 Minutes	All	90832 AJ U6 U2	30 minute	1
CSW/Community	Professional Services - 30 Minutes	All	90832 AJ U5	30 minute	1
CSW/Telehealth	Professional Services - 30 Minutes	All	90832 AJ U6	30 minute	1
MST/Community /SD	Professional Services - 30 Minutes	All	90832 HO U5 U2	30 minute	1
MST/Telehealth/SD	Professional Services - 30 Minutes	All	90832 HO U6 U2	30 minute	1
MST/Community	Professional Services - 30 Minutes	All	90832 HO U5	30 minute	1
MST/Telehealth	Professional Services - 30 Minutes	All	90832 HO U6	30 minute	1
CSW/Community /SD	Professional Services - 45 Minutes	All	90834 AJ U5 U2	45 minute	1
CSM/Telehealth/SD	Professional Services - 45 Minutes	All	90834 AJ U6 U2	45 minute	1
CSW/Community	Professional Services - 45 Minutes	All	90834 AJ U5	45 minute	1
CSW/Telehealth	Professional Services - 45 Minutes	All	90834 AJ U6	45 minute	1
MST/Community /SD	Professional Services - 45 Minutes	All	90834 HO U5 U2	45 minute	1
MST/Telehealth/SD	Professional Services - 45 Minutes	All	90834 HO U6 U2	45 minute	1
MST/Community	Professional Services - 45 Minutes	All	90834 HO U5	45 minute	1
MST/Telehealth	Professional Services - 45 Minutes	All	90834 HO U6	45 minute	1
CSW/Community /SD	Professional Services - 60 Minutes	All	90837 AJ U5 U2	60 minute	8
CSM/Telehealth/SD	Professional Services - 60 Minutes	All	90837 AJ U6 U2	60 minute	8
CSW/Community	Professional Services - 60 Minutes	All	90837 AJ U5	60 minute	8
CSW/Telehealth	Professional Services - 60 Minutes	All	90837 AJ U6	60 minute	8
MST/Community /SD	Professional Services - 60 Minutes	All	90837 HO U5 U2	60 minute	8
MST/Telehealth/SD	Professional Services - 60 Minutes	All	90837 HO U6 U2	60 minute	8
MST/Community	Professional Services - 60 Minutes	All	90837 HO U5	60 minute	8
MST/Telehealth	Professional Services - 60 Minutes	All	90837 HO U6	60 minute	8
Community /SD/EVV	Professional Services - Speech Therapist	All	92507 U5 U2 U1	15 minute	32
Community /EVV	Professional Services - Speech Therapist	All	92507 U5 U1	15 minute	32
Community/SD	Professional Services - Speech Therapist	All	92507 U5 U2	15 minute	32
Telehealth/SD	Professional Services - Speech Therapist	All	92507 U6 U2	15 minute	32
Community	Professional Services - Speech Therapist	All	92507 U5	15 minute	32
Telehealth	Professional Services - Speech Therapist	All	92507 U6	15 minute	32
Community /SD/EVV	Professional Services - Occ Therapist	All	97110 GO U5 U2 U1	15 minute	32
Community /EVV	Professional Services - Occ Therapist	All	97110 GO U5 U1	15 minute	32
Community/SD	Professional Services - Occ Therapist	All	97110 GO U5 U2	15 minute	32
Telehealth/SD	Professional Services - Occ Therapist	All	97110 GO U6 U2	15 minute	32
Community	Professional Services - Occ Therapist	All	97110 GO U5	15 minute	32
Telehealth	Professional Services - Occ Therapist	All	97110 GO U6	15 minute	32
Community /SD/EVV	Professional Services - Phys Therapist	All	97110 GP U5 U2 U1	15 minute	32
Community /EVV	Professional Services - Phys Therapist	All	97110 GP U5 U1	15 minute	32
Community/SD	Professional Services - Phys Therapist	All	97110 GP U5 U2	15 minute	32



Telehealth/SD	Professional Services - Phys Therapist	All	97110 GP U6 U2	15 minute	32
Community	Professional Services - Phys Therapist	All	97110 GP U5	15 minute	32
Telehealth	Professional Services - Phys Therapist	All	97110 GP U6	15 minute	32
Community/SD	Professional Services - BCBA	All	97151 U5 U2	15 minute	32
Telehealth/SD	Professional Services - BCBA	All	97151 U6 U2	15 minute	32
Community	Professional Services - BCBA	All	97151 U5	15 minute	32
Telehealth	Professional Services - BCBA	All	97151 U6	15 minute	32
CSW/Community /SD	Professional Services - LCS	All	H0004 AJ U5 U2	15 minute	32
CSM/Telehealth/SD	Professional Services - LCS	All	H0004 AJ U6 U2	15 minute	32
CSW/Community	Professional Services - LCS	All	H0004 AJ U5	15 minute	32
CSW/Telehealth	Professional Services - LCS	All	H0004 AJ U6	15 minute	32
MST/Community /SD	Professional Services - LMHC	All	H0004 HO U5 U2	15 minute	32
MST/Telehealth/SD	Professional Services - LMHC	All	H0004 HO U6 U2	15 minute	32
MST/Community	Professional Services - LMHC	All	H0004 HO U5	15 minute	32
MST/Telehealth	Professional Services - LMHC	All	H0004 HO U6	15 minute	32
Community/SD	Professional Services - BCaBA	All	H0032 U5 U2	15 minute	32
Telehealth/SD	Professional Services - BCaBA	All	H0032 U6 U2	15 minute	32
Community	Professional Services - BCaBA	All	H0032 U5	15 minute	32
Telehealth	Professional Services - BCaBA	All	H0032 U6	15 minute	32
Community/SD/EVV	Professional Services - RN	All	T1002 U5 U2 U1	15 minute	96
Community/EVV	Professional Services - RN	All	T1002 U5 U1	15 minute	96
Community/SD	Professional Services - RN	All	T1002 U5 U2	15 minute	96
Telehealth/SD	Professional Services - RN	All	T1002 U6 U2	15 minute	96
Community	Professional Services - RN	All	T1002 U5	15 minute	96
Telehealth	Professional Services - RN	All	T1002 U6	15 minute	96
Community/SD/EVV	Professional Services - LPN	All	T1003 U5 U2 U1	15 minute	96
Community/EVV	Professional Services - LPN	All	T1003 U5 U1	15 minute	96
Community/SD	Professional Services - LPN	All	T1003 U5 U2	15 minute	96
Telehealth/SD	Professional Services - LPN	All	T1003 U6 U2	15 minute	96
Community	Professional Services - LPN	All	T1003 U5	15 minute	96
Telehealth	Professional Services - LPN	All	T1003 U6	15 minute	96
Community/SD	Professional Services - Interpreter	All	T1013 U5 U2	15 minute	32
Telehealth/SD	Professional Services - Interpreter	All	T1013 U6 U2	15 minute	32
Community	Professional Services - Interpreter	All	T1013 U5	15 minute	32
Telehealth	Professional Services - Interpreter	All	T1013 U6	15 minute	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 allowed and approved
- 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

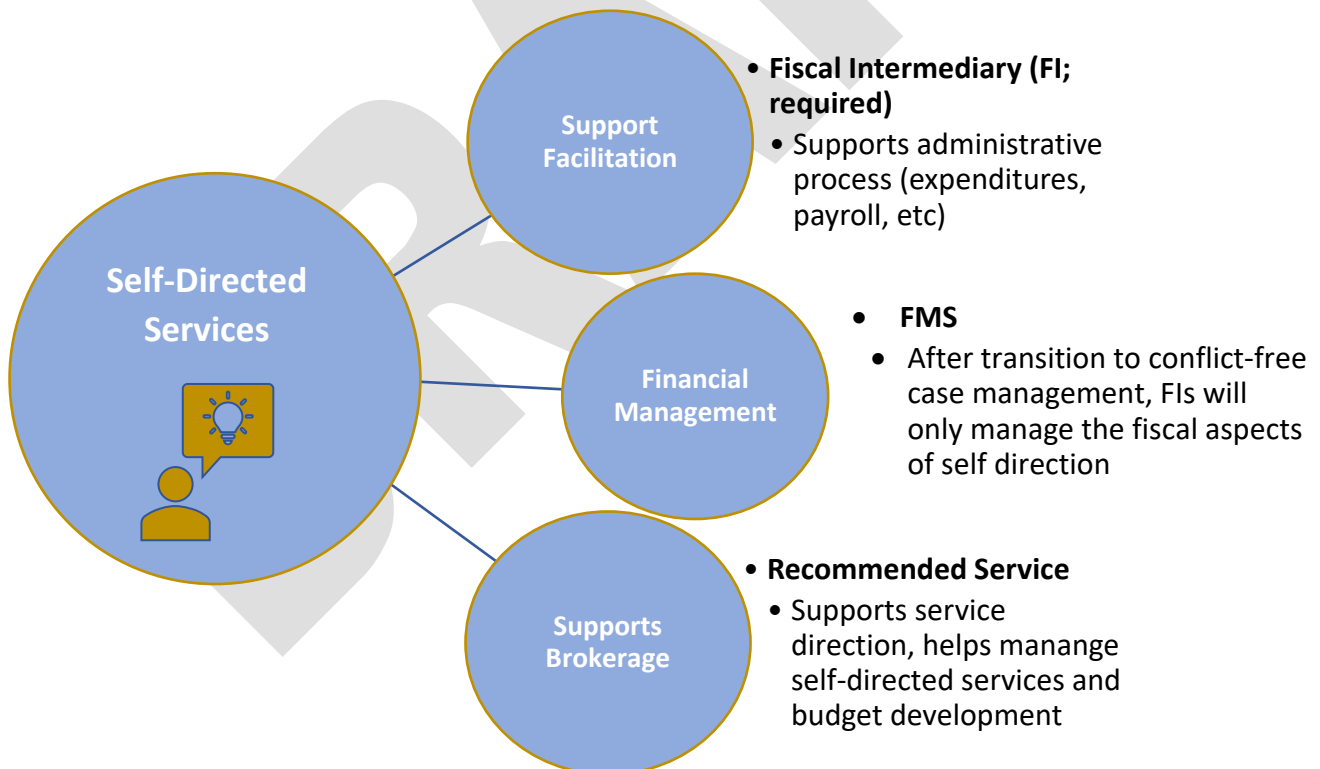
Billing Codes	Modifier	Service Allocation
S5165		Per Service

# 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. Respite can be provided under self-direction at the same hourly rate the self-directed participant pays their usual staff, not to exceed \$35/hour.
  - a. In non-self-directed services, the per diem rate for respite is equal to the payment for nine hours of service. Respite through self-direction has the same cap of 9 hours per day.
5. 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.
6. There is a \$5,000 limit per year on goods and services.

### *Electronic Visit Verification*

Individuals who self-direct are subject to Electronic Vehicle Verification (EVV) for community-based supports and some professional services when the services are provided in their home and if the person providing the service does not live in the same home.

The Cures Act requires EVV to be used for “in-home visits” for personal care services. The Centers for Medicare and Medicaid Services (CMS) define Personal care services (PCS) as “a range of human assistance provided to persons with disabilities and chronic conditions to enable them to accomplish activities of daily living (ADLs) or instrumental activities of daily living (IADLs)”

Worker shifts that begin in the home and end in the community (or vice versa) only require EVV for the portion of the shift that takes place in the home.

Self development tasks are not applicable to EVV. When staff are supporting a participant to do or learn a task, instead of doing the task for the person, the service is not subject to EVV. If the task is not typically done for an individual or if it is an incidental situation, then EVV is not applicable.

The Cures Act does not require EVV to be used when the participant and worker live together (even if they have separate apartments within the same home). EVV is required only for “in-home visits”. Living together means they share the same mailing address, utilities etc.

## Financial Management Services

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. This service is the financial part of Support Facilitation and will replace Support Facilitation for individuals who transition to the new Case Management Agencies through EOHHS.

### Service Characteristics

- The Financial Management Service (FMS) is managed by a 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.
- Vendor-Only FMS is for individuals who are using self-direction only to purchase goods and services or transportation. Vendor-only services do not include any activities associated with self-directed employees or payroll.

### Included in Rate

- Wages and fringe benefits of the Fiscal Intermediary’s financial staff and other staff who participate in Financial Management activities or that provide Fiscal Intermediary services
- Transportation costs incurred by the Fiscal Intermediary staff to fulfill job duties
- Fiscal Intermediary 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	Billing Codes	Modifier One	Modifier Two	Service Allocation
FMS - All Tiers	T2050	U2		Month
FMS Vendor Only – All Tiers	T2050	U2	U3	Month

## 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	Billing Codes	Modifier One	Modifier Two	Service Allocation
All Tiers	T2022	TG	U2	Month
All Tiers	T2022	UA	U2	Month

### Vendor Only

Tier	Billing Codes	Modifier One	Modifier Two	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 ([Financial Resources: Rate Table](#)).

### Billing Codes

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

**Max Daily Billable Units = 96**



## Billing Codes for Self-Directed Services

See other sections of this manual for definitions of the services below.

Self-Directed Category	BHDDH Service	Tier/ Ratio	HCPC / Modifier	Billing Unit	Max Units
Community Supports	Community Based Supports Self Directed	All	T2017 U2	15 minutes	96/day
Community Supports	Community Based Supports Self Directed L9	All	T2017 L9 U2	15 minutes	96/day
Community Supports	Community Based Supports Self Directed EVV	All	T2017 U2 U1	16 minutes	96/day
Community Supports	Respite Care Self-Direct	All 1:1	T1005 U2	15 minutes	36/day
Employment	Job Retention Self-Directed	A	T2023 U2 U5	per month	1/month
Employment	Job Retention Self-Directed	B	T2023 U2 U6	per month	1/month
Employment	Job Retention Self-Directed	C	T2023 U2 U7	per month	1/month
Employment	Job Retention Self-Directed	D	T2023 U2 UA	per month	1/month
Employment	Job Retention Self-Directed	E	T2023 U2 TG	per month	1/month
Employment	Personal Support in the Workplace SD	All 1:1	H2025 U2	15 minutes	40
Employment	Job Exploration	All	TBD	15 minutes	32
Employment	Discovery - Self-Directed	All	H2023 U2	15 minutes	32
Employment	Job Coaching Self-Directed	All 1:1	T2019 U2	per service	32/day
Other	Transportation- Self-Direct	All	T2003 U2	per trip	12/day
Other	Transportation - Additional Funds	All	T2003 L9	per trip	12/day
Other	Peer Supports - Self-Directed	All	H0038 U2	15 minutes	16

## 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
  - Increase the individual’s ability to perform activities of daily living
  - Increase the individual’s safety in the home environment
  - 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:
  - 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
  - Be approved by the Division before any purchases are made
- 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	Billing Codes	Modifier	Service Allocation
All Tiers	T1999	U2	Per Hour or Per Unit

**Max Allowed = \$5,000 (excluding personnel-related costs)**

## *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 \$3,000 annually or \$250 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 L6): Can be submitted at any time.**

- 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): Must be submitted 60 days before the requested start date.**

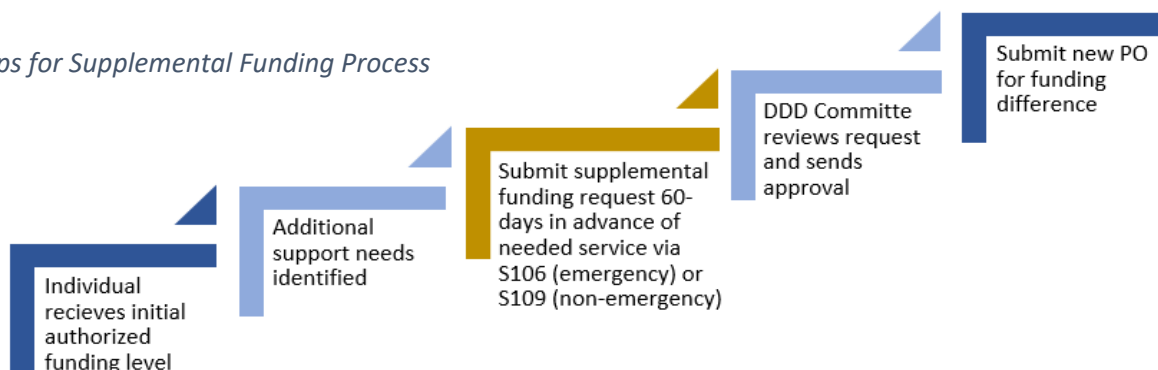
- Non-emergency request for supplemental needs that directly relates to the imminent health and safety needs of an individual that cannot be met with the initial funding

The DD Committee reviews requests on a weekly basis. A decision for S106 is an S107, which will be made within 7 days. A decision for S109 is an S110, which will be made within 30 days.

The [S106 and S109 forms](#) can be found on the BHDDH website, and should be submitted via email to [bhddh.s109@bhddh.ri.gov](mailto:bhddh.s109@bhddh.ri.gov).

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 [L9 Conversion Worksheet](#) can be used as a reference to determine the funding difference.

### Steps for Supplemental Funding Process



# 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 [EOHHS Provider Reference Manual](#) 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 [EOHHS Provider Reference Manual](#) or the [EOHHS RI Medicaid Provider Training Days](#) 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

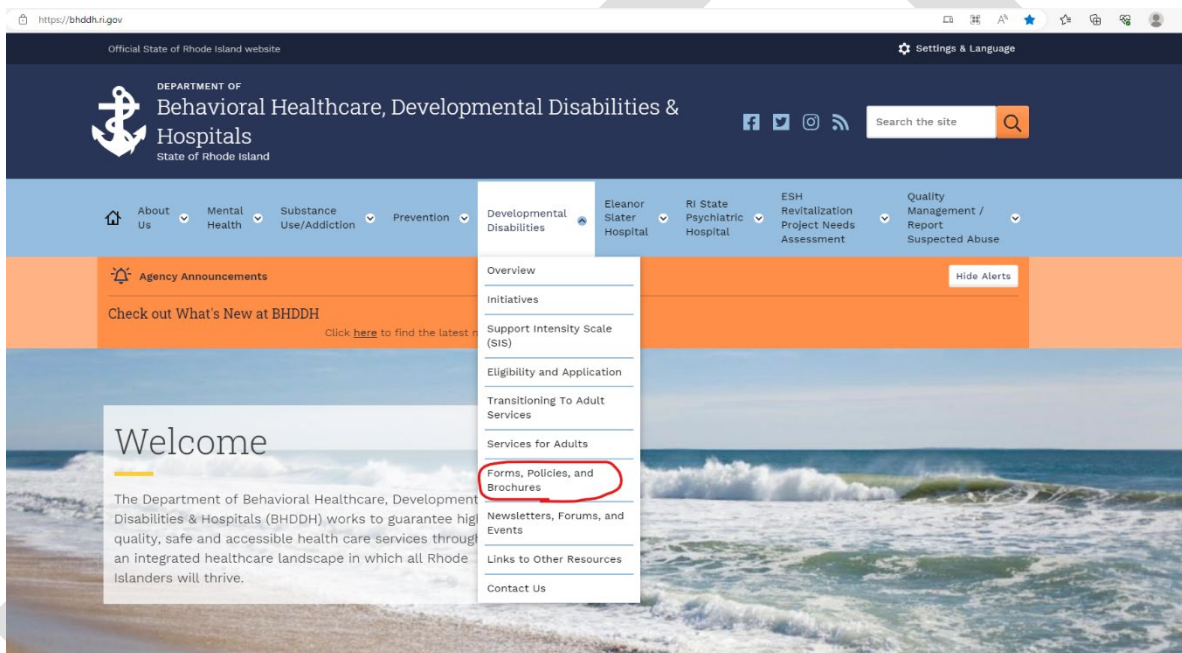
## Final Rate Models

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:** Only when services are grouped together in a program-specific authorization.

**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](mailto: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).

# Rate Table FY2025

Please refer to the BHDDH website for the most recent rate table.

DRAFT