



Case Manager Guidance

Developing and Entering Planned Services

1. Understand DD Services - References

- a. [Service Spotlight Cards](#) and Guide to Services ([DD Guidebook](#))
- b. [Licensed DD Provider Services](#) and Provider List (excel)
- c. [2025 Rate Table](#) and Reference Codes (excel)
- d. WellSky Risk and Objectives (excel)
- e. [The billing manual](#) (2025)

Note: When reading past plans, look at purchase order along with the plan goals to see how goals were translated into services.

2. Available Funding Amount

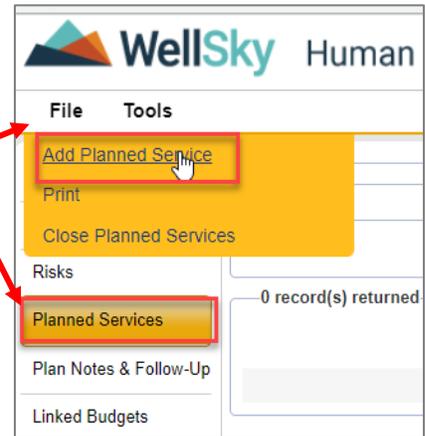
The amount of funding each individual has will be found on the Budget tab in WellSky. It will show the base funding, ANSQ funding, any supplemental funding, and any add-on funding. This has not been entered yet.

- Refer to the [funding level chart](#)
- S110 letter for supplemental funding (in Notes tab)
- Notice of Funding Level letter (in Notes tab)
- Add-on funding can be approved for employment and seen in Authorizations

3. Add Planned Services in WellSky

Role = Case Manager

1. Click the **Planned Services** subpage within the Plan
2. From the **File** menu, select **Add Planned Service**
3. OpenClose defaults to LTSS
4. Start Date and End Date default to the service start date and service end date from the Plan Information page



5. Click ellipsis (...) next to **Index/ SubObject Code**, select the IndexCode "BHDDH". Required

The screenshot shows the 'Planned Services' form in the WellSky Human Services interface. The 'Index/SubObject Code' field has an ellipsis (...) button next to it. A red arrow points from this button to the 'DialogIndexCodeSelectPopUp' dialog box. The dialog box displays a table with 5 records returned, and the first row is highlighted in red.

IndexCode	IndexDescription	SubObject	SubObjectDescription	FundCode	ID
BHDDH	BHDDH	IDD/HCBS	IDD/HCBS	LTSS	71
EOHHS	EOHHS	EAD/HCBS	EAD/HCBS	LTSS	73
EOHHS	EOHHS	HAB	Habilitation	LTSS	74
EOHHS	EOHHS	AL/HCBS	Assisted Living HCBS	LTSS	77
OHA	OHA	At Home	At Home Cost Share	LTSS	76

6. Click the drop-down arrow for **MMIS Program** and select the correct program

The screenshot shows the 'Planned Services' form in the WellSky Human Services interface. The 'MMIS Program' dropdown menu is open, and 'DD Home Health Services' is selected. A red arrow points from the dropdown menu to the 'Service Code Search' dialog box. The dialog box has a 'Search By' dropdown menu with options: 'Service Type', 'Service Category', 'Service Code', and 'Description'. A red arrow points from the 'Service Code' option to the 'Search Text' field.

See the reference list of MMIS Programs with Service Codes and Descriptions and/or Rate Sheet

7. Click ellipsis (...) next to Service Code

8. Choose what you want to search by

9. Enter at least 3 characters in the Search Text box, and click **Search**

Service Code	Description	Fund Code	Effective Date	End Date	Unit Type	Unit Cost	Consumer County	Provider RateType	Service Ratio	Internal Program
T2017	Community Supports 1:1	LTSS	07/01/2023		15 mins	\$12.36				BHDDH Community Support, DD CNOM Eligibility
T2017:U2	Self-Directed Community Supports	LTSS	07/01/2023		15 mins	\$12.36				BHDDH Community Support, DD CNOM Eligibility

10. Select the service

Service Code * T2017

Service Description Community Supports 1:1

Unit Type 15 mins

Units Per

Units of Measure Year

Total No of Units

Provider ID

Provider

Unit Cost \$12.36

Max Amount

Service Justified By

Service Change Type *

Reason for Service Change

Reason Change Code *

Additional Comments

11. Enter **Units Per**

Generally, enter the total Units to be provided during the Year

For example, if someone wants 10 hours of community-based supports per week for the full year you would do the following:

10 hours X 4 (because there are 4 -15 minute units in an hour) x 52 weeks in year = 2080

12. Enter **Units of Measure**

Choose Year

13. The following will automatically calculate

- a. Total No of Units
- b. Unit Cost
- c. Max Amount

Provider ID

Provider

See the reference list of DD Providers and Fiscal Intermediaries

14. Click **ellipsis (...)** next to Provider ID

15. Select the **provider** who will be providing this service

(if known at this time, otherwise you will have to come back to this step to select the provider)

16. Select a **Service Justified By**

Either goal or assessed risk. If a Goal is selected, an additional field is shown to describe the goal and the priority ranking

17. Select a **Service Change Type**. For each new annual plan it would be 'New'

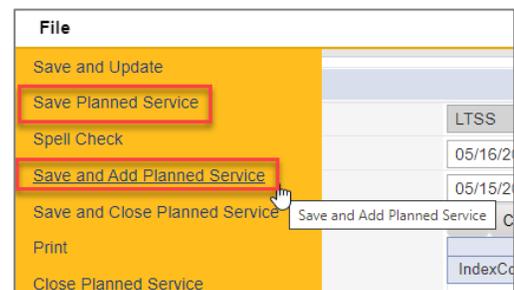
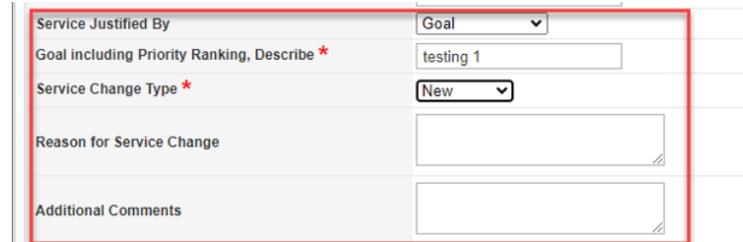
18. Enter Reason for Service Change

- a. Optional for annual plans
- b. Required for amendments

19. Enter Additional Comments (optional)

- a. Enter itemized goods and services request, if any
- b. If requesting RIPTA transportation, enter RIPTA in comments

20. From the **File** menu, select **Save Planned Service** or **Save and Add Planned Service**



Important Notes

- If making changes on the planned services, the page will reset, and information already entered will be deleted.
 - For example, if CFCM forgets to select Index/SubObject Code and then goes back after completing page to select the Index/SubObject Code, the page will reset, and all information entered will be lost.
- Although it is not indicated on the page, the following are required:
 - Index/SubObject Code
 - MMIS Program (on DD Services Rate Table, refer to Program under header)
 - Unit Per
 - Units of Measure
- Note: If RICLAS is the provider, enter code T2033 with modifier for Tier. Select RICLAS as provider but enter **\$0** for unit cost and max amount.
- Community Residence Supports = Group Home
- When choosing residential services, 344 is the max total number of units per year (to allow for absenteeism).
- L9s (supplemental funding that was granted) are entered the same as whatever else you are entering but with L9 modifier

- Example CBS = T2017: L9 (vs CBS without an L9 = T2019)
- CFCMs need to **update unit cost** when entering L9. The Unit Cost is automatically set to max amount.
- For CFCM, enter code (G9012)
 - Do not enter Provider
 - Enter 12 units per year and \$0 into Unit Cost

										Change	Synced	
G9012	Conflict-Free Case Management	12.0000	\$170.87	\$2,050.44	04/01/2025	03/31/2026	Conflict-Free Case Management	Goal	New		n/a	<input type="checkbox"/>
							BDHHD					

- When choosing Provider ID, please note some providers have more than one code.
 - Some providers have an NPI for their general agency and another NPI for their FI. Please take care to select the correct Provider ID.
 - Fogarty has its own page on the Provider List excel
- When entering Transportation services with **RIPTA**
 - MMIS Program = BDHHD Transportation
 - Enter Service Code = T2003 (along with other information such as the number of units).
 - Do not select a provider. Leave provider blank.
 - Then, make a note in the comments = RIPTA.
- Note- Trips for transportation are one-way

Self-Direct

- Support Facilitation should not be entered. Enter Financial Management Services (T2050: U2) instead.
- For self-direct, change the **Unit Cost** to \$1 and enter the max amount as the total amount requested (rather than changing to hourly wage plus tax, etc.)
 - Use the Community Based Supports Code = T2017:U2.
- All goods and services request should include itemized documentation using the goods and services form.
 - Specifics including the service and amount of money requested should be noted in the comment box on the planned services page when entering goods and services
 - [Goods & Services Request Form](#)