

MEMORANDUM

To: DDA Stakeholders

From: Bernard Simons, Deputy Secretary

Re: DDA Amendment #3 2020 – Guidance #2 – Person-Centered Plan (PCP) Service

Changes

Release Date: February 16, 2021 Effective: January 19, 2021

NOTE: Please inform appropriate staff members of the contents of this memorandum.

BACKGROUND

On January 19, 2021, the Centers for Medicare and Medicaid Services (CMS) approved the Maryland Department of Health (MDH) Developmental Disabilities Administration (DDA) Waiver Amendments #3 2020 with an effective date of January 19, 2021.

The purpose of this guidance is to inform stakeholders of changes to the DDA's Medicaid Home and Community-Based Services (HCBS) Waiver programs (*i.e.*, Community Pathways Waiver, Community Supports Waiver, and Family Supports Waiver) (each a "DDA Waiver program") and operations based on the approved amendments.

This guidance applies to Applicants and Participants, Coordinators of Community Services (CCS), DDA Providers, and DDA Regional Office Program Staff related to development, approval, and authorization functions and processes for an applicant's or participant's Person-Centered Plan (PCP). This guidance applies to both the self-directed and traditional service delivery models for the following services.

OVERVIEW

Changes set forth in Amendment #3 of the DDA Waiver program applications impact on PCPs in the following four key ways:

- 1. Hourly service units changing to 15-minute units;
- 2. Day Habilitation Groups replacing Day Habilitation Small and Large Group;
- 3. Nursing Supports Services replacing Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services; and
- 4. Community Living Retainer Fee no longer displaying in the detailed service authorization.

Updates in LTSS*Maryland*'s functionality, to reflect these changes, will be released into the system on February 14, 2021, with all new service changes effective March 1, 2021.

Please note that this guidance memorandum is intended to highlight the changes in the DDA Waiver programs created by Amendment #3. This guidance memorandum does not address all applicable DDA Waiver program requirements. To review all applicable DDA Waiver program requirements, please refer directly to Amendment #3 of the DDA Waiver program application, effective January 19, 2021.

Applicable Services Reference Table

N	leaningful Day Services	tesidential Services		Support (CCS and Wa			
Х	Employment Services	х	Community Living – Group Home - Dedicated Hours		Assistive Technology & Services	х	Nurse Consultation
	Supported Employment	Х	Community Living – Enhanced Supports - Dedicated Hours		Behavioral Support Services	х	Nurse Health Case Management
	Employment Discovery & Customization	Х	Supported Living - Dedicated Hours		Coordination of Community Services	х	Nurse CM & Delegation Svs
Х	Career Exploration		Shared Living		Environmental Assessment		Participant Ed, Training & Advocacy
Х	Community Development Svs				Environmental Modification	х	Personal Supports
Х	Day Habilitation			Х	Family & Peer Mentoring Supports	х	Respite Services
					Family Caregiver Training & Empowerment		Remote Support Services
				Χ	Housing Support		Support Broker
					Live-in Caregiver Supports		Transportation Svs
				Х	Nursing Support Services		Vehicle Mods

A. HOURLY UNITS CHANGING TO 15-MINUTE UNITS

Standards and Requirements

- 1. To provide more flexibility for participants to design meaningful day services to meet their needs and choices of activities and mitigate the loss of revenue by providers, one (1) hour services units will now be noted as 15-minute billing increments going forward.
- 2. LTSSMaryland Service Authorization Section
 - a. Updates were made to the PCP service authorization service calculation page to reflect this change.
 - b. CCS can still facilitate planning with applicants and participants, and their chosen DDA providers, using hourly entries and will also now be able to add additional 15, 30, 45 minutes units.
 - 1) It is recommended to reflect the total units needed in terms of weekly units and select every day of the week to ensure the most flexibility and account for months with five weeks.
 - 2) It is important to confirm the DDA provider's operational days when completing this section. DDA Providers can note operational days in the Detailed Service Authorization Tool (DSAT) to help communicate.
 - 3) The LTSS*Maryland* system will multiply out the hours entered to 15-minute increments starting after the updates on February 14, 2021.

Daily Unit Calculation Type: All ✓ May August ✓ November January February April ✓ May ✓ minutes Sunday: Thursday: hours hours ✓ minutes Monday: 2 hours 15 🗸 minutes Friday: hours 30 Tuesday: hours 45 Saturday: Wednesday: hours ✓ minutes Days Per Week: 4 (max 7 days a week) How Many Weeks: * All (max 3 weeks) Units Per Week: 38 ◆ Update Calculation ★ Cancel Aug Dec Feb Mar Apr

Example

- c. These services will operate like the 15-minute billing units found in PS services.
 - a. The following services have been converted to 15-minute units:

Meaningful Day Services	Residential Services
Career Exploration Services - Facility	Dedicated Hours for Community Living -
Based	Enhanced Supports (1:1)
	Dedicated Hours for Community Living -
Career Exploration Services - Large Group	Enhanced Supports (2:1)
	Dedicated Hours for Community Living -
Career Exploration Services - Small Group	Group Home (1:1)
Community Development Services 1:1	Dedicated Hours for Community Living -
Staffing Ratio	Group Home (2:1)
Community Development Services 2:1	Dedicated Hours for Supported Living
Staffing Ratio	(1:1)
Community Development Services Group	Dedicated Hours for Supported Living
(1-4)	(2:1)
Day Habilitation 1:1 Staffing Ratio	
Day Habilitation 2:1 Staffing Ratio	Support Services
Day Habilitation Large Group (6-10)	Family and Peer Mentoring Supports
Day Habilitation Small Group (2-5)	Housing Support Services
Employment Services - Ongoing Job Supports	Respite Hour
Employment Services - Job Development	

3. LTSSMaryland Person-Centered Plans

- a. All PCPs in the system that have an effective period that crosses March 1, 2021 will be automatically updated to reflect another service line with 15-minute unit calculations.
- b. The system is going to track the new 15-minute service separate from the previous hourly services. This means the PCPs will have two service lines, one service line with hourly unit calculations and one service line with 15-minute unit calculations.

Example Only

Note: Example reflects service change occurring Oct/Nov DDA's transition will occur in Feb and March

- 1. Community Development Services Group reflecting hourly units
- 2. Community Development Services Group reflecting 15-minute units
- 3. Respite Care Services reflecting hourly units
- 4. Respite Care Services reflecting 15-minute units



Example before Update:

Service Status & Effective Date	Service and Provider	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Annual Service Cost	Actions	Provider Status	Provider Status Date
New - 01/05/2021	1:1 Staffing Ratio	19	20	23	22	21	22	22	22	22	21	22	23	3	\$	Edit Delete	N/A	N/A

Example after Update: (Note Mar - Jan is zeroed out for hourly units in first line)

Service Status & Effective Date	Service and Provider	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Annual Service Cost	Actions	Provider Status	Provider Status Date
New - 01/05/2021	Day Habilitation 1:1 Staffing Ratio	19	20	0	0	0	0	0	0	0	0	0	0	0	\$,	Edit Delete	N/A	N/A
New - 01/05/2021	Day Habilitation 1:1 Staffing Ratio	0	0	92	88	84	88	88	88	88	84	88	92	12	\$. ,	Edit Delete	N/A	N/A

- c. Providers will need to accept both service lines, if applicable.
- d. PCPs with effective dates on or after March 1, 2021 will only reflect the 15-minute units for services.

e. "Pending Regional Review" status and "Approved" status

- PCPs that are in "Pending Regional Review" status or "Approved" status will not require any additional action by the CCS, Providers, or Regional Offices for the update.
- 2) The system will automatically reflect the new 15-minute service line.
- 3) The Provider acceptance document will not match the 15-minute units.
- 4) The Provider Portal will reflect a system generated acceptance with the following comment "This referral was auto-generated for a previously accepted service, due to a system-wide update of billing units for this service, effective 03/01/2021."

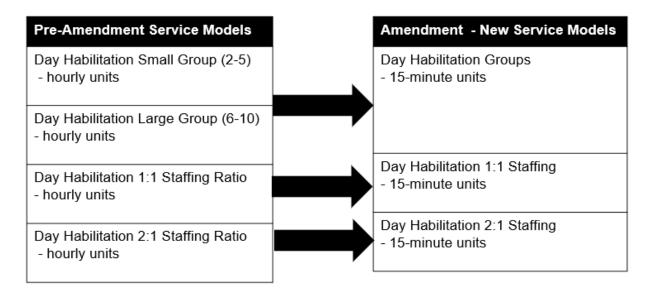
f. "In Progress" or "Pending Clarification" status

- 1) PCPs that are in "In Progress" or "Pending Clarification" status with the CCS may require DDA Provider acceptance for the updated 15-minute services lines.
- 2) "In Progress" and "Pending Clarification" PCPs may require DDA Provider reacceptance if the provider has already accepted the hourly services.
- 3) The CCS should review the service authorization service acceptance and rerequest acceptance as needed in accordance with this guidance.

B. DAY HABILITATION SERVICES

Standards and Requirements

1. Effective March 1, 2021, to provide more flexibility for participants to receive day habilitation services in either small or large groups, the PCP's detailed service authorization service option will no longer include a distinction between Day Habilitation Large Group (6-10) or Day Habilitation Small Group (2-5) and will now reflect Day Habilitation Groups.



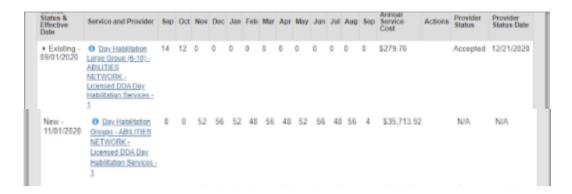
2. LTSSMaryland Service Authorization Section

a. Approved PCPs:

- 1) All approved PCPs that have an effective period that crosses March 1, 2021 will be automatically updated to reflect another service line with Day Habilitation Group unit calculations.
- 2) This means the PCP may have multiple Day Habilitation service line (e.g., Day Habilitation Small Group (2-5) hourly units, Day Habilitation Large Group (6-10) hourly units, and Day Habilitation Groups 15-minute units).
- 3) No action is required by the CCS, DDA providers, or the Regional Offices.

Example Only

Note: Example reflects service change occurring Oct/Nov DDA's transition will occur in Feb and March



b. New Initial, Revised, and Annual PCPs - service request options:

- 1) PCPs effective prior to March 1, 2021, the detail service authorization section will include the following options for Day Habilitation:
 - a) Day Habilitation Small Group (2-5) hourly units;
 - b) Day Habilitation Large Group (6-10) hourly units;
 - c) Day Habilitation 1:1 Staffing Ratio hourly units; and
 - d) Day Habilitation 2:1 Staffing Ratio hourly units.
- 2) PCPs effective on or after March 1, 2021, the detail service authorization will include the following options for Day Habilitation:
 - a) Day Habilitation Groups 15-minute units;
 - b) Day Habilitation 1:1 Staffing Ratio 15-minute units; and
 - c) Day Habilitation 2:1 Staffing Ratio 15-minute units.

c. "Pending Regional Review" and "Approved" PCP Status

- 1) PCPs that are in "Pending Regional Review" status or "Approved" status will not require any additional action by the CCS, DDA Providers, or Regional Offices for the update.
- The system will automatically convert Day Habilitation Small and Large Group units into Day Habilitation Groups units for March 1, 2021 and subsequent months.

d. "In Progress" or "Pending Clarification" PCP Status

- 1) PCPs that are in "In Progress" status or "Pending Clarification" status with the CCS may require DDA Provider acceptance for the Day Habilitation Groups services line.
- 2) "In Progress" and "Pending Clarification" PCPs may require DDA Provider reacceptance if the DDA Provider has already accepted the Day Habilitation Small and Large Group hourly services.
- 3) DDA Providers will need to accept both service lines, if applicable.

e. Service Information - Service Title drop down

- 1) For PCPs effective prior to March 1, 2021, the Service Information Service Title drop down options will display Day Habilitation Small Group (2-5), Day Habilitation Large Group (6-10), Day Habilitation 1:1 Staffing Ratio, Day Habilitation 2:1 Staffing Ratio, and Day Habilitation Groups.
- 2) For PCPs effective on or after March 1, 2021, the Service Information -Service Title drop down options will:
 - i) Only display Day Habilitation 1:1 Staffing Ratio, Day Habilitation 2:1 Staffing Ratio, and Day Habilitation Groups; and
 - ii) No longer display Day Habilitation Small Group (2-5) and Day Habilitation Large Group (6-10) options.

Example

Day Habilitation 1:1 Staffing Ratio
Day Habilitation 2:1 Staffing Ratio
Day Habilitation Groups

f. Revising Day Habilitation Services

- 1) Day Habilitation Small Group (2-5) and Day Habilitation Large Group (6-10) that end on or before February 28, 2021, cannot be edited.
- 2) If the CCS attempts to revise these services, the system will display a message that "This service cannot be provided after 02/28/2021."

g. Adding Day Habilitation Services

- 1) For Adding the Day Habilitation Services, available only after March 1, 2021, unit calculation months available are only after March and previous months are grayed out.
- 2) The system will display a message that "This service is effective 03/01/2021."

h. Adding Day Habilitation Groups Provider

When adding Day Habilitation Groups:

- 1) If a DDA Provider <u>has not been selected</u>, the CCS can complete the Provider Search process to select the provider the participant has chosen.
- 2) If a DDA Provider <u>has already been noted</u> for the Day Habilitation Groups through the data patch, the CCS will need to modify the existing service authorization as needed. If the CCS attempts to add another Day Habilitation Groups line to the service authorization section, the following message will be displayed "The Selected Provider # is already authorized for

Day Habilitation Groups in this PCP. Please modify units on the existing authorization, if needed."

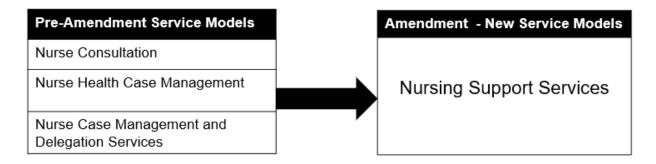
3. Day Habilitation Groups - Rate and Billing

- a. Effective March 1, 2021, the PCP detailed service authorization for the Day Habilitation Group service will reflect the Day Habilitation Small Group rate.
- b. DDA Provider Billing
 - 1) Pilot Providers LTSS*Maryland* Billing Providers will bill through the Provider Portal for the actual service provided, either Day Habilitation Small Group or Large Group, and the applicable service rate will be applied.
 - 2) Non- Pilot Providers PCIS2 Billing Service billed through PCIS2 will not be affected and will continue to be billed at the current daily rate.

C. NURSING SUPPORT SERVICES

Standards and Requirements

 Effective March 1, 2021, the PCP's detailed service authorization service option will no longer include Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services as a Support Service option and will now reflect Nursing Support Services.



2. LTSSMaryland Service Authorization Section

a. Approved PCPs:

- All approved PCPs that have an effective period that crosses March 1, 2021 will be automatically updated to reflect another service line with Nursing Support Services unit calculations.
- 2) This means the PCP may have multiple nursing service lines (*e.g.*, Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services and Nursing Support Services).
- 3) No action is required by the CCS, DDA Providers, or the DDA Regional Offices.

Example

Service Status & Effective Date	Service and Provider	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Annual Service Cost	Actions	Provider Status	Provider Status Date
New - 09/15/2020	Nursing - Nurse Case Management and Delegation - ABILITIES NETWORK	120	232	220	232	228	208	0	\$26,883.20		Accepted	1/12/2021
New - 09/15/2020	Nursing Support Services - ABILITIES NETWORK	0	0	0	0	0	0	24	\$520.32		Accepted	1/12/202

b. In Process - New, Revised, and Annual PCPS - service request options:

- 1) PCPs effective prior to March 1, 2021, the detail service authorization will include the following options nursing services options:
 - a) Nurse Consultation;
 - b) Nurse Health Case Management; and
 - c) Nurse Case Management and Delegation Services.
- 2) PCPs effective on or after March 1, 2021, the detail service authorization will include the Nursing Support Service option only.

c. "Pending Regional Review" or "Approved" PCP Status

- 1) PCPs that are in "Pending Regional Review" status or "Approved" status will not require any additional action by the CCS, DDA Providers, or DDA Regional Offices for the update.
- 2) The system will automatically reflect the new units for Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services and Nursing Support Services units for March 2021 and subsequent months.

d. "In Progress" or "Pending Clarification" PCP Status

- 1) PCPs that are "In Progress" status or "Pending Clarification" status with the CCS may require DDA Provider acceptance for the Nursing Support Services line.
- 2) "In Progress" and Pending Clarification" PCPs may require DDA Provider reacceptance if the DDA Provider has already accepted the Nurse Consultation, Nurse Health Case Management, or Nurse Case Management and Delegation Services.
- 3) DDA Providers will need to accept both service lines, if applicable.

e. Service Information - Service Title drop down

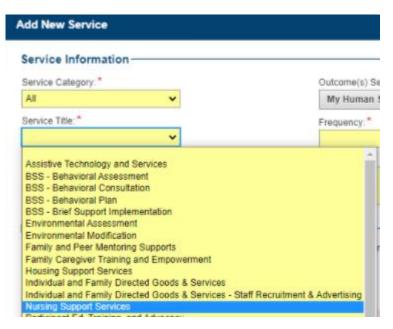
For PCPs effective before March 1, 2021, the Service Information - Service
 Title drop down options will display Nurse Consultation, Nurse Health Case
 Management, and Nurse Case Management and Delegation Services and
 Nursing Support Services.

Example



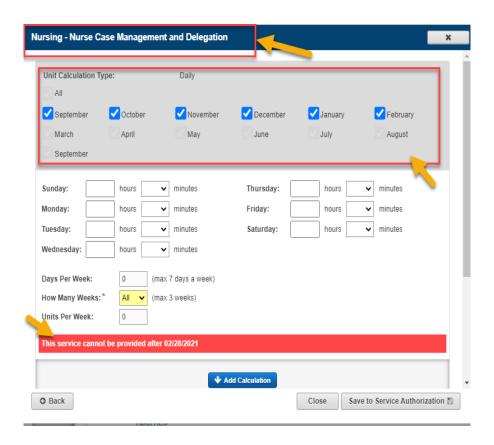
2) Effective March 1, 2021, the Service Information - Service Title drop down options will only display Nursing Support Services as an option. Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services will no longer display as a Support Service option.

Example



- f. Revising Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services
 - 1) For nursing services that end on or before February 28, 2021, (*i.e.*, Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services) cannot be edited.
 - 2) If the CCS attempts to revise these services, the system will display a message that "This service cannot be provided after 02/28/2021."

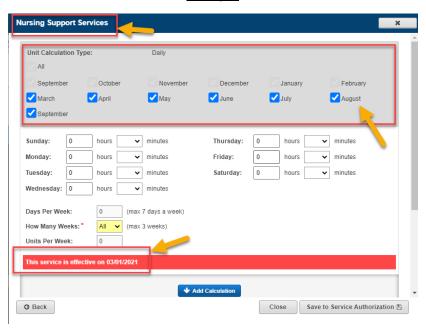
Example



g. Adding Nursing Support Services

- For Adding the Nursing Supports Services service, unit calculation months available are only after March 1, 2021 (when this service option becomes available) and previous months are grayed out.
- 2) The system will display a message that "This service is effective 03/01/2021."

Example



h. Adding Nursing Support Services Provider

When adding Nursing Support Services:

- 1) If a DDA Provider <u>has not been selected</u>, the CCS can complete the Provider Search process to select the provider the participant has chosen.
- 2) If a DDA Provider <u>has already been noted</u> for the Nursing Support Services through the data patch, the CCS will need to modify the existing authorization as needed. If the CCS attempts to add another Nursing Support Service line to the service authorization section, the following message will be displayed "The Selected Provider # is already authorized for Nursing Support Services in this PCP. Please modify units on the existing authorization, if needed."

Example

Provider Search	
Provider Name:	Provider Number:
Provider Address:	
Location Name: Provider Number: The Selected Provider # is already authorized for Nursing Supportif needed	Licensed Address: Search It Services in this PCP. Please modify units on the existing authorization,

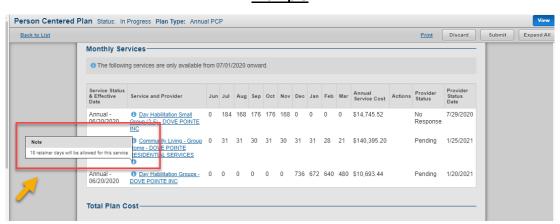
3. Nursing Support Services - Rates and Billing

- Effective March 1, 2021, the PCP detailed service authorization for Nursing Support Services will reflect the current Nurse Case Management and Delegation Services rate.
- b. Nursing supports, provided as part of a core service such as Meaningful Day and residential services, are not affected and will remain a service component of those applicable services and included in those rates.
- c. DDA Provider Billing
 - 1) Nursing services are not yet live and billed in LTSS*Maryland*, except for the pilot program. All non-Pilot providers should continue to follow PCIS2 billing practices as detailed below.
 - 2) Non- Pilot Providers PCIS2 Billing Providers will continue to be billed using the invoice process and will bill for the actual service provided (*i.e.*, Nurse Consultation, Nurse Health Case Management, Nurse Case Management and Delegation Services, and Nursing Support Services) using the applicable service rate.
 - 3) Pilot Providers LTSSMaryland Billing Providers will bill through the Provider Portal for the actual service provided (i.e., Nurse Consultation, Nurse Health Case Management, Nurse Case Management and Delegation Services, and Nursing Support Services) and the applicable service rate will be applied.

D. Community Living Retainer Fee

Standards and Requirements

- 1. Effective March 1, 2021, the PCP detailed service authorization section will no longer display Community Living Retainer Fee as a separate service line.
- 2. For PCPs effective before March 1, 2021, Community Living Retainer Fee is currently auto-added to the Community Living Group Home and Community Living Enhanced Supports service without requirement for acceptance.
- 3. All approved PCPs that have an effective period that crosses March 1, 2021 will be automatically updated to remove the service line for subsequent months.
- 4. The PCP detailed service authorization service icon tooltip will include a statement indicating how many retainer days are allowed for the service, according to the current requirements, not including Appendix K.



Example

- 5. The system will display the following message when Community Living Group Home and Community Living Enhanced Supports service are included in the detailed service authorization section:
 - "Authorization of this service includes Retainer Days as per DDA Policy"
- 6. LTSS*Maryland* Provider Portal Billing is not yet live for Providers, except for the Pilot. Billing for residential retainer days should follow current guidelines and processes for PCIS2.

Applicable Resources:

Community Pathways Waiver

Community Supports Waiver

Family Supports Waiver