



August 24, 2020

Interim Billing Guidance for Day Habilitation, Supplemental Day Habilitation and Site-Based Prevocational Providers following the July 21, 2020 conclusion of the Day Service Retainer Program

As communicated in the July 17, 2020 memorandum, *Day Service Retainer Program – Last Eligible Day for Claiming is July 21, 2020,* the Day Service Retainer Program concluded on July 21, 2020. The purpose of this memorandum is to outline additional billing protocols providers may implement following the conclusion of the retainer program to support ongoing Day Service reopening.

Effective July 22, 2020, OPWDD is extending certain provisions of the Day Service Retainer Program for providers that signed the attestation and participated in the program between March 18, 2020 and July 21, 2020. Other flexibilities will be available to all Day Habilitation and Prevocational Services providers.

To support the reopening of Day Services, and based on the authority provided by the recently approved Appendix K Waiver, the below changes are being made to the minimum billing standards and will be in effect from July 22, 2020 through October 14, 2020. These temporary changes are being made with the expectation that providers will convert their unutilized center-based day program capacity to non-center-based and telemodalities of service delivery in order to increase community involvement opportunities for waiver enrollees.

1) Modified Billing Standards for <u>All</u> Day Habilitation and Site-Based Prevocational Services Providers

To support the reopening of Day Services, the following changes to the minimum billing standards apply to services delivered between July 22, 2020 and October 14, 2020 and apply to all day habilitation and site-based prevocational service providers.

a) Defining Program Day Duration for Day Habilitation and Site-Based Prevocational Services

The temporary program day duration shall include:

- i) Face-to Face service time:
- ii) Time where staff are engaged with the person using remote telehealth delivery, in accordance with COVID-19 telehealth guidance; and
- iii) Mealtimes.

b) Minimum Billing Standards for Full Units and Half Units of Day Habilitation and Site-Based Prevocational Services for service dates of July 22, 2020 through October 14, 2020

Current service documentation standards for Day Habilitation and Site-Based Prevocational Services require both the documentation of staff actions, drawn from the person's Staff Action Plan, and a minimum program day duration.

- i) The standards for the documentation of <u>staff actions</u> are **not** changed. Payment for a full unit of Day Habilitation or Site-Based Prevocational Services continue to require that the provider document at least two services in accordance with the appropriate Administrative Memorandum (ADM). Payment for a half unit of Day Habilitation or Site-Based Prevocational Services require that the provider document as least one service in accordance with the appropriate ADM.
- ii) The standards for the <u>program day duration</u> **are** temporarily changed. Payment for a full unit of Day Habilitation or Site-Based Prevocational Services require that the provider deliver and document a program day duration of at least two hours (the standard in the ADMs is four hours). Payment for a half unit of Day Habilitation or Site-Based Prevocational Services require that the provider deliver and document a program day duration of at least one hour (the standard in the ADMs is two hours). Full and half units of service billed that do not meet the pre-COVID-19 standard for program day duration (of four or two hours minimum) must be billed using the revenue code 0249.

2) Rescinding Prior Guidance on non-Face-to-Face Services for Day Habilitation and Site-Based Prevocational Services

With the flexibility now provided to Day Habilitation and Site-Based Prevocational Services providers, OPWDD hereby rescinds for these providers the following flexibility described previously as "Delivering Services and Maintaining Social Distancing:"

During the state of emergency, Prevocational Service providers may provide and bill Medicaid for services that support the person, while maintaining social distancing. For example, Prevocational Services staff may deliver groceries or other supplies, or assist with necessary outdoor household chores (such as taking garbage cans to the curb and returning cans to the home). For these types of services, the time that staff spend traveling to the person's home, running the errand, and returning to the worker's home, may be billed as Prevocational Services.

This temporary modification to billing activity (originally authorized in the following two guidance documents: *Interim COVID-19 Guidance Regarding Day Habilitation*, dated April 24, 2020, and *Interim COVID-19 Guidance Regarding Prevocational Services*, dated April 24, 2020) will not be allowed for providers of Day Habilitation and/or Site-Based Prevocational Services taking advantage of the service limit flexibility, effective August 24, 2020. For example, a provider taking advantage of service duration flexibility may no longer bill for staff time spent traveling to

a person's home, providing non face-to-face services, such as taking out their garbage, and returning to the employee's home/office.

For service dates between July 22, 2020 and August 23, 2020, providers may use <u>either</u> the flexibilities to include non-face-to-face service time as described in the above guidance documents, or the modified program day duration requirements of two hours (for a half unit) and four hours (for a full unit). Any claims that use both provisions will be subject to disallowance. For example, a claim for a full unit of Day Habilitation will be subject to disallowance if it is based on 'counting' staff travel time toward a program day duration and the total program day duration is two hours.

3) Limitations for Providers Opting to use the Modified Billing Standards

Providers that opt to use the above the modified program day duration standards must comply with the limitations described in this section.

a) Daily Billing Limits if Agency is Using the Flexible Definitions for Program Day Duration

On service days that the provider opts to use the flexible definition of program day duration, described above, the provider may bill no more than the following, **per person, per day:**

- i) One full unit of Day Habilitation or Site-Based Prevocational Services; or
- ii) One half unit of Day Habilitation <u>and</u> one-half unit of Site-Based Prevocational Services.

b) Financial Limits for Agencies Using the Flexible Definitions for Program Day Duration

Providers billing for services rendered using the flexible definitions of the program day duration for Day Habilitation or Site-Based Prevocational Services are subject to the following limitations:

- iii) The total monthly number of units claimed for each service shall not exceed the average monthly units claimed for that service during the period of July 1, 2019 through December 31, 2019; and
- iv) The combined average monthly revenue for Day Habilitation and Site-Based Prevocational Services, Community-Based Prevocational Services and Community Habilitation claimed by the provider may not exceed the provider's combined average monthly revenue for those services for the period of July 1, 2019 through December 31, 2019, subject to any appropriate adjustments.

Any claims in excess of these limitations will be subject to immediate recoupment.

4) Only for Providers that Participated in the Day Service Retainer Program for Service Dates of March 18, 2020 through July 21, 2020: Service Authorization and the Developmental Disabilities Regional Office (DDRO)

As communicated in the July 17, 2020 memorandum, *Day Service Retainer Program – Last Eligible Day for Claiming is July 21, 2020,* providers may no longer submit billing for retainer days. However, the following flexibilities will be maintained only for providers that participated in the Day Service Retainer Program, until further notice from OPWDD:

- a. Providers that opted into the Day Service Retainer Program (signed attestation) during the period of the retainer program, continue to have the flexibility after July 21, 2020 to offer Day Habilitation, Community Habilitation, and Prevocational Services to meet the needs of a person they are presently serving, without seeking an additional authorization through the DDRO or submitting a Developmental Disabilities Profile 1 (DDP1)/DDP1 Supplement – within the limits of the Day Services Retainer Program;
- These same providers may also offer these same services to address a crisis situation for a person they are presently serving without the need for DDRO authorization or submitting a DDP1/DDP1 Supplement;
- Updates to the Life Plan and Staff Action Plan can be facilitated using the COVID-19
 Life Plan and Staff Action Plan Addendum with a copy sent to OPWDD (instructions to follow);
- d. The person's current Life Plan and Staff Action Plans remain in place until changes are made in accordance with OPWDD's COVID-19 Guidance.

5) Continuation of Group Community Habilitation – Residential (Group CH-R)

Supervised Individual Residential Alternative (IRA) providers may continue to deliver and bill eMedNY for Group CH-R provided to IRA residents who, prior to the public health emergency, participated in Day Habilitation or Prevocational Services delivered by a different provider. The claiming of CH-R by the IRA provider is subject to the authorization of OPWDD and the authorized monthly units. No claims for Group CH-R may be submitted on a day when an individual receives Day Habilitation or Prevocational Services. No claims for Group CH-R may be submitted during a week in which the individual receives a total of 5 days of Day Habilitation or Prevocational Services per week.