



CHANGING
Maryland
for the Better

Community Pathways Waiver Amendment #1 Implementation Update

*A Partnership for better communication on
developmental disability services in Maryland*

DDA Webinar
June 30, 2016



Amendment #1 - Purpose

1. Enhance self-directed service model by removing 82 hour service preauthorization requirement and update personal support services by removing staff hour restrictions;
2. Update program capacity by adjusting projections for the number of unduplicated participant based on current trends, new reserved capacity, and legislative appropriation to support new participants each year;
3. Update and establish new reserve waiver capacity for waiver participants;
4. Update projected service cost based on adjustment to unduplicated participant count and current service utilization;

Reference: Community Pathways Waiver Amendment #1
MD.0023.R06.1 pages 1 – 2.

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Amendment #1 - Purpose

5. Remove requirement for active treatment in order to be eligible for the Waiver;
6. Change personal supports unit of service from an hour to 15 minute units; and
7. Update terminology, language, and calculations (such as removing previous information about waiver merger and replacing resource coordination with coordination of community services) in various sections including: Waiver Descriptions, Program Goals, Public Input, Transition Plan, Independent Advocacy, Attachment 1 – Transition Plan, Attachment #2 – Home and Community-Based Setting Waiver Transition Plan, and Cost Neutrality Demonstration.

Reference: Community Pathways Waiver Amendment #1
MD.0023.R06.1 pages 1 – 2.

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Waiver Amendment #1

- Submitted to CMS on March 29, 2016
- CMS request March 30, 2016
 - Additional information requested such as:
 - Time period for listening sessions and surveys
 - MD Registry access (electronic versus paper)
 - Tribal Consultation
 - Summary of Comments
 - Revision to Attachment #2 (Statewide Transition Plan)
- Resubmitted to CMS on April 7, 2016

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Waiver Amendment #1

➤ CMS Informal Questions April 27th, May 6th, and May 10th related to:

- ✓ Attachment #1 Transition Plan
- ✓ Use of Contracted Entities
- ✓ Assessment Method and Frequency
- ✓ Unduplicated Number of Participants
- ✓ Selection of Entrants to Waiver
- ✓ Post Eligibility Treatment of Income
- ✓ Level of Care Criteria
- ✓ Waiver Services
- ✓ HCBS Settings
- ✓ Risk Assessment and Mitigation
- ✓ QIS Health and Welfare Discovery and Remediation
- ✓ Eligibility Groups Served in the Waiver
- ✓ Health Risk Screening Tool

➤ Response submitted May 6, 2016 and May 10, 2016

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Waiver Amendment #1

- CMS Amendment Approval Letter – June 10, 2016
- Amendment effective date – July 1, 2016

Slide #6



Personal Supports

- Personal supports provide regular personal assistance, support, supervision, and training to assist the individual to participate fully in their home and community life. These supports can be provided in the participant's own home, family home, in the community, and at an individual competitive, integrated work site.
- Amendment enhanced self-directed service model by removing 82 hour service preauthorization requirement and updated personal support services by removing staff hour restrictions.
- DDA Memo sent to participants self-directing services on November 10, 2015.
 - Participants self-directing determine number of hours and work schedules based on approved funding.
- Participants self-directing and licensed providers must comply with all federal and State labor laws including overtime requirements.

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Active Treatment

- DDA's *Advisory Guidelines for Determining Eligibility for DDA Funded Services* (December 2012) being updated.
- Recommendations from the Developmental Disabilities Coalition and independent consultant to be incorporated.
- Eligibility determinations must meet the current statute (Md. Code, Health Gen. Art. § 7-101(f)).
- Eligibility determinations for children are the same as adults.
- Information and training to be provided for Coordinators of Community Services and Regional Office staff.

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Personal Supports - Billing

- Effective July 1, 2016, Personal Supports unit of service will transitioned from an “Hour” to “15 minute increments.”
- Providers are to enter Personal Support services based on 15 minute increments.
- Services must be billed in 0.25 increments, referred to as a 15-minute unit. Therefore a 15 minute service unit is entered as a 0.25 increment.
- Minutes of services are to be totaled by day by service. The sum total is then either rounded up or down to the nearest 15 minute increment

.25 increment = 15 minutes

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Personal Supports - Billing

- A provider may not bill for a Personal Support service of less than 8 minutes if it is the only Personal Support services provided that day.
- For multiple daily contacts of Personal Supports services on the same day, providers are to total the actual minutes and then round up to the nearest 15 minute increment.
- If the total minutes end in a seven or less, round down to the nearest 15 minute increment.
- Do not round up each service contact to the nearest 15 minute increment before totaling the **units per day per service**.

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Personal Supports - Billing

Billing Examples:

- Three separate Personal Support service contacts (e.g. morning, noon, and evening) for the same participant of 7 minutes each, equaling 21 total timed minutes, must be billed as one 15-minute unit of service or .25 increment.
- Three separate Personal Support service contacts for the same participant of 8 minutes each, equaling 24 total timed minutes, must be billed as .50 increments (2 units).

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Personal Supports Increments

Units/Increments	Minutes of Service
0	Less than 7 minutes
.25	Greater than or equal to 8 minutes, but less than 23 minutes (8-22 min)
.50	Greater than or equal to 23 minutes, but less than 38 minutes (23-37 min)
.75	Greater than or equal to 38 minutes, but less than 53 minutes (38-52 min)
1.0	Greater than or equal to 53 minutes, but less than 68 minutes (53-67 min)
1.25	Greater than or equal to 68 minutes, but less than 83 minutes (68-82 min)
1.50	Greater than or equal to 83 minutes, but less than 98 minutes (83-97 min)
1.75	Greater than or equal to 98 minutes, but less than 113 minutes (98-112 min)
2.0	Greater than or equal to 113 minutes, but less than 128 minutes (113-127 min)

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Personal Supports Attendance Screen

<u>Residential/Day/Supp. Emp.</u>	<u>Attendance Summary Report</u>	<u>Consumer Attendance Summary Report</u>	<u>Reimbursable Days</u>	<u>CSLA</u>	<u>Personal Support</u>	
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Attendance Main Menu

- Residential/Day/Supp. Emp.
- Attendance Summary Report
- Consumer Attendance Summary Report
- CSLA
- Personal Support



Personal Supports Attendance Screen

[Consumer](#) [Rates](#) [Budget](#) [Contracts](#) [Provider](#) [Attendance](#) [Payments](#) [Reports](#) [MMIS](#)

You have 0 [Workflows](#) and 2 [Notifications](#) since 06/24/2016 at 01:40 PM. [Refresh Count](#)

Maryjane
Osazuwa

[Home](#) [Logout](#)

Residential/Day/Supp. Emp./CLS/EDC	Attendance Summary Report	Consumer Attendance Summary Report	CSLA	Personal Support
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Personal Support Query

* Provider

* Month

* Year

* Site

* Consumer

Click Search to
view attendance

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Personal Supports Attendance Screen

[Consumer](#)
[Rates](#)
[Budget](#)
[Contracts](#)
[Provider](#)
[Attendance](#)
[Payments](#)
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You have 0 [Workflows](#) and 2 [Notifications](#) since 06/24/2016 at 01:40 PM. [Refresh Count](#)


Maryjane Osazuwa

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[Residential/Day/Supp. Emp./CLS/EDC](#)
[Attendance Summary Report](#)
[Consumer Attendance Summary Report](#)
[CSLA](#)
[Personal Support](#)

Personal Support Query Result

Provider: [Agency Name](#)
 Site: [Site address](#)
 Year: 2016 Month: 7

Consumer ID	Name	Service Start Date	Service End Date	Month/Year	Certified	Total Base Hours	Total Add-on Hours	
PCIS2 ID#	First, Last Name	09/01/2015		07/2016	N	0.0	0.0	

Click on Pencil to View



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Personal Supports Attendance Screen

Service: Base

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29	30	1 0.0	2 0.0
3 0.0	4 0.0	5 0.0	6 0.0	7 0.0	8 0.0	9 0.0
10 0.0	11 0.0	12 0.0	13 0.0	14 0.0	15 0.0	16 0.0
17 0.0	18 0.0	19 0.0	20 0.0	21 0.0	22 0.0	23 0.0
24 0.0	25 0.0	26 0.0	27 0.0	28 0.0	29 0.0	30 0.0
31 0.0	1	2	3	4	5	6

Example of Hours:
0 = 0 minutes
0.25 = 15 minutes
0.50 = 30 minutes
0.75 = 45 minutes
1.25 = 1 hour 15 minutes
1.50 = 1 hour 30 minutes
1.75 = 1 hour 45 minutes
2.00 = 2 hours

Number of Hours:

- Providers may enter total hours/increments per day or use “Enter All” button to populate month with same number of hours

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Example - Same Service Hours Per Day

Service: Base

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29	30	1 <input type="text" value="0.25"/>	2 <input type="text" value="0.25"/>
3 <input type="text" value="0.25"/>	4 <input type="text" value="0.25"/>	5 <input type="text" value="0.25"/>	6 <input type="text" value="0.25"/>	7 <input type="text" value="0.25"/>	8 <input type="text" value="0.25"/>	9 <input type="text" value="0.25"/>
10 <input type="text" value="0.25"/>	11 <input type="text" value="0.25"/>	12 <input type="text" value="0.25"/>	13 <input type="text" value="0.25"/>	14 <input type="text" value="0.25"/>	15 <input type="text" value="0.25"/>	16 <input type="text" value="0.25"/>
17 <input type="text" value="0.25"/>	18 <input type="text" value="0.25"/>	19 <input type="text" value="0.25"/>	20 <input type="text" value="0.25"/>	21 <input type="text" value="0.25"/>	22 <input type="text" value="0.25"/>	23 <input type="text" value="0.25"/>
24 <input type="text" value="0.25"/>	25 <input type="text" value="0.25"/>	26 <input type="text" value="0.25"/>	27 <input type="text" value="0.25"/>	28 <input type="text" value="0.25"/>	29 <input type="text" value="0.25"/>	30 <input type="text" value="0.25"/>
31 <input type="text" value="0.25"/>	1	2	3	4	5	6

Number of Hours:

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Example - Various Service Hours Per Day

Service: Base

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29	30	1 0.0	2 0.25
3 0.50	4 0.50	5 0.50	6 1.50	7 1.50	8 0.25	9 0.25
10 1.25	11 1.25	12 1.25	13 1.25	14 0.75	15 0.75	16 0.75
17 1.75	18 1.75	19 1.75	20 1.75	21 1.75	22 1.75	23 1.75
24 2.00	25 2.00	26 2.00	27 2.00	28 2.00	29 2.00	30 2.00
31 0.75	1	2	3	4	5	6

Number of Hours

Enter All

Save

Certify

Go Back

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Example - Invalid Entry

Service: Base

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	29			
3 0.0	4 0.0	5 0.0	6 0.0			
10 0.0	11 0.0	12 0.0	13 0.0	14 0.0	15 0.0	16 0.0
17 0.0	18 0.0	19 0.0	20 0.0	21 0.0	22 0.0	23 0.0
24 0.0	25 0.0	26 0.0	27 0.0	28 0.0	29 0.0	30 0.0
31 0.0	1	2	3	4	5	6

pcispreprod.dhmh.state.md.us says:
Invalid number.
 Prevent this page from creating additional dialogs.
OK

Invalid Number error message

Number of Hours: 0.23 Enter All

0.23 hours will display invalid number error

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Personal Support Budgeted Hours and Spending Summary

Hours Spending Summary Service	Start Date	End Date	Budgeted Hours	Hours used this month	Hours used this fiscal year	Remaining Hours
Base	07/01/2016	06/30/2017	962.5	0.0	0.0	962.5

- Participants budgeted hours, hours used for current month, hours used per Fiscal Year, and remaining hours are displayed



Fillable Personal Support Error Update Form

In the event of an incorrect attendance during the same billing period, please complete the fillable error update for Manual Adjustment

Developmental Disabilities Administration
Personal Support Error Update
 Please fill all the following required information:

Consumer Name:	PCI52 ID:
Provider Name:	Provider No:
Site Address:	Site Number:
Operation Month & Year:	Changes requested by:
E-mail:	Phone and Extension:
Agency's Executive Director's Signature:	
Agency Comments:	DDA Comments:

<p style="text-align: center;">TOTAL SERVICE TIME Please enter hours in 0.25 increments.</p> <ul style="list-style-type: none"> ⊕ 0 min - Less than 7 minutes per day (not billable) ⊕ .25 min - Greater than or equal to 8 minutes, but less than 23 minutes (8 to 22 min) ⊕ .50 min - Greater than or equal to 23 minutes, but less than 38 minutes (23 to 37 min) ⊕ .75 min - Greater than or equal to 38 minutes, but less than 53 minutes (38 to 52 min) ⊕ 1.0 min - Greater than or equal to 53 minutes, but less than 68 minutes (53 to 67 min) 	<ul style="list-style-type: none"> ⊕ 1.25 min - Greater than or equal to 68 minutes, but less than 83 minutes ⊕ 1.49 min - 2 hrs Greater than or equal to 90 min, but less than 149 minutes. ⊕ 1.50 min - Greater than or equal to 83 minutes, but less than 98 minutes (83-97 min) ⊕ 1.75 min - Greater than or equal to 98 minutes, but less than 113 minutes (98-112 min) ⊕ 2.0 min - Greater than or equal to 113 minutes, but less than 128 minutes (113 to 127 min) <p>Total Hours Used = <input style="width: 50px;" type="text"/></p>
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Base

1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	9	10	11	12	13	14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	16	17	18	19	20	21
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	23	24	25	26	27	28
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	30	31				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Professional Support: Behavior Support

1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	9	10	11	12	13	14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	16	17	18	19	20	21
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	23	24	25	26	27	28
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	30	31				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Professional Support: Nursing

1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Professional Support: General

1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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DDA Helpdesk Contact Information

- DDA Helpdesk Email:

Helpdesk.dda@maryland.gov

- Helpdesk Phone Number: 410-767-0747
- Training - PCIS2 Overview – July 8, 2016
 - Personal Support – July 20, 2016
 - Regional Training to be scheduled
 - See DDA Training Calendar link

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DDA Amendment #1 Webpage

- Community Pathways Waiver Amendment #1 – Effective July 1, 2016
- CMS Amendment Approval Letter – June 10, 2016
- MD Response - CMS Informal Review Questions MD 0023 R06 01 5-6-16
- MD Response - CMS Informal Review Questions #3 (5-10-16) MD 0023 R06 01 5-11-16

<http://dda.dhmf.maryland.gov/Pages/Waiver%20Amendment%201.aspx>

*Links to documents

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