IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT201766 SEPTEMBER 28, 2017

FSSA announces CMS approval of CIH and FSW amendments

The Indiana Family and Social Services Administration (FSSA) has received approval from the Centers for Medicare & Medicaid Services (CMS) for amendments to the Community Integration and Habilitation (CIH) waiver and the Family Supports Waiver (FSW). The approved amendments are effective October 1, 2017.

The approved CIH and FSW amendments include a 5% provider rate increase for the services listed in Table 1. *Indiana Code IC 12-15-1.3-18* requires authorized providers use at least 75% of the amount of the rate increase to increase the wages paid to direct care staff. For more information regarding implementation of this requirement, see the Division of Disability and Rehabilitative Services (DDRS) announcement: *Implementation Information of Indiana Code 12-15-1.3-18 – Reimbursement Rate Increase*. For questions, contact: rateincreaseplan@fssa.in.gov.

A complete list of the approved rates under the CIH and FSW programs is provided in an <u>attachment</u> to the bulletin. The rates listed apply to dates of service (DOS) on or after October 1, 2017.

Table 1 – CIH and FSW waiver services with 5% rate increases for DOS on or after October 1, 2017

CIH Waiver Services	FSW Services
Adult Day Services (all levels)	Adult Day Services (all levels)
Community Habilitation – Group and Individual	Community Habilitation – Group and Individual
Extended Services	Extended Services
Facility Habilitation – Group and Individual	Facility Habilitation – Group and Individual
Facility-Based Support	Facility-Based Support
Prevocational Services	Participant Assistance and Care
Residential Habilitation Services (RHD) – (Daily and Hourly)	Prevocational Services
Respite Care Services	Respite Care Services
Transportation Services (all levels)	Transportation Services (all levels)
Workplace Assistance	Workplace Assistance

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 1-800-457-4584.

SIGN UP FOR IHCP EMAIL NOTIFICATIONS

To receive email notices of IHCP publications, subscribe by clicking the blue subscription envelope here or on the pages of indianamedicaid.com.

COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from indianamedicaid.com.

TO PRINT

A <u>printer-friendly version</u> of this publication, in black and white and without graphics, is available for your convenience.

Medicaid Waiver Services, Codes, and Rates, Effective October 1, 2017 For Family Supports (FSW) Waiver and Community Integration and Habilitation (CIH) Waiver											
Waiver					Modifiers						
		INsite		Natl.						Unit/	Unit/\$
sw	CIH	Code	Service Description	Code	1	2	3	4	Rate	Size	Limit
		ADS1	Adult Day Services, Level 1	S5101	U7	U5	U1		\$23.05	.50/Day	2 Units/ Day
		ADS2	Adult Day Services, Level 2	S5101	U7	U5	U2		\$30.24	.50/Day	2 Units/ Day
		ADS3	Adult Day Services, Level 3	S5101	U7	U5	U3		\$36.00	.50/Day	2 Units/ Day
		AS14	Adult Day Services, ¼ Hour, Level 1	S5100	U7	U5	U1		\$1.45	.25/Hour	12 Units/Day
		AS24	Adult Day Services, ¼ Hour, Level 2	S5100	U7	U5	U2		\$1.89	.25/Hour	12 Units/Day
		AS34	Adult Day Services, ¼ Hour, Level 3	S5100	U7	U5	U3		\$2.25	.25/Hour	12 Units/Day
		BMGO	Behavior Management, Basic	H0004	U7	U5	U2		\$18.20	.25/Hour	
		BG1O	Behavior Management, Level 1	H0004	U7	U5	U1		\$18.20	.25/Hour	
		CMGT	Case Management	T2022	U7	U5			\$131.25	1.00/Month	1 Unit/Month
		CMGT	Case Management	T2022	U7	U5			\$125.00	1.00/Month	1 Unit/Month
		CHIO	Community Habilitation, Individual	T2020	U7	U5			\$24.85	1.00/Hour	
		CHG2	Community Habilitation, Group (2:1)	T2020	U7	U5	U2		\$8.90	1.00/Hour	
		CHG3	Community Habilitation, Group (3:1)	T2020	U7	U5	U3		\$8.90	1.00/Hour	
		CHG4	Community Habilitation, Group (4:1)	T2020	U7	U5	U4		\$8.90	1.00/Hour	
		CHG6	Community Habilitation, Group (6:1)	T2020	U7	U5	U6		\$4.96	1.00/Hour	
		CHG8	Community Habilitation, Group (8:1)	T2020	U7	U5	U8		\$4.96	1.00/Hour	
		CHGB	Community Habilitation, Group (10:1)	T2020	U7	U5	UB		\$4.96	1.00/Hour	
		СТ	Community Transition	T2038	U7	U5			Individual	1.00/Unit	\$1,000 Lifetime
		EM1	Electronic Monitoring, 1 Participant	A9279	U7	U5	UA		\$13.62	1.00/Hour	
		EM2	Electronic Monitoring, 2 Participants	A9279	U7	U5	U2		\$6.81	1.00/Hour	
		EM3	Electronic Monitoring, 3 Participants	A9279	U7	U5	U3		\$4.54	1.00/Hour	
		EM4	Electronic Monitoring, 4 Participants	A9279	U7	U5	U4		\$3.41	1.00/Hour	
		EMOI	Environmental Modification, Install	S5165	U7	U5	NU		Individual	1.00/Unit	\$15,000 Lifetim
		EMOM	Environmental Modification, Maintain	S5165	U7	U5	U8		Individual	1.00/Unit	\$500/Year
		INSP	Equipment – Assess/Inspect/Train	T1028	U7	U5			\$17.99	.25/Hour	
		EXTS	Extended Services	T2025	U7	U5	UA		\$36.96	1.00/Hour	
		FBS	Facility Based Support	T1020	U7	U5	UA		\$1.94	1.00/Hour	
		FHIO	Facility Habilitation, Individual	T2020	U7	U5	UA		\$24.85	1.00/Hour	

Division of Disability & Rehabilitative Services • Bureau of Developmental Disabilities Services

		INsite		Natl.						Unit/	Unit/\$
FSW	CIH	Code	Service Description	Code	1	2	3	4	Rate	Size	Limit
		FHG2	Facility Habilitation, Group (2:1)	T2020	U7	U5	UA	U2	\$8.90	1.00/Hour	
		FHG4	Facility Habilitation, Group (4:1)	T2020	U7	U5	UA	U4	\$8.90	1.00/Hour	
		FHG6	Facility Habilitation, Group (6:1)	T2020	U7	U5	UA	U6	\$4.96	1.00/Hour	
		FHG8	Facility Habilitation, Group (8:1)	T2020	U7	U5	UA	U8	\$4.96	1.00/Hour	
		FHGB	Facility Habilitation, Group (10:1)	T2020	U7	U5	UA	UB	\$4.96	1.00/Hour	
		FHGC	Facility Habilitation, Group (12:1)	T2020	U7	U5	UA	UC	\$3.15	1.00/Hour	
		FHGD	Facility Habilitation, Group (14:1)	T2020	U7	U5	UA	UD	\$3.15	1.00/Hour	
		FHG9	Facility Habilitation, Group (16:1)	T2020	U7	U5	UA	U9	\$3.15	1.00/Hour	
		FCAR	Family & Caregiver Training, Family	S5111	U7	U5			Individual	1.00/Unit	\$2,000/Year
		FCNF	Family & Caregiver Training, Non-Family	S5116	U7	U5			Individual	1.00/Unit	\$2,000/Year
		IBI1	Intensive Behavioral Intervention, Level 1	H2020	U7	U5	U1		\$104.60	1.00/Hour	
		IBI2	Intensive Behavioral Intervention, Level 2	H2020	U7	U5	U2		\$25.00	1.00/Hour	
		MUTH	Music Therapy	H2032	U7	U5	U1		\$10.78	.25/Hour	
		ОСТН	Occupational Therapy	G0152	U7	U5	UA		\$17.99	.25/Hour	
		PAC	Participant Assistance and Care	T2033	U7	U5			\$24.40	1.00/Hour	
		PRSI	Personal Response System, Install	S5160	U7	U5			\$52.07	1.00/Unit	2 Units/CCB
		PRSM	Personal Response System, Maintain	S5161	U7	U5			\$52.07	1.00/Unit	1 Unit/Month
		PHTH	Physical Therapy	G0151	U7	U5	UA		\$18.12	.25/Hour	
		PV02	Pre-Vocational (2:1)	T2015	U7	U5	U2		\$8.90	1.00/Hour	
		PV04	Pre-Vocational (4:1)	T2015	U7	U5	U4		\$8.90	1.00/Hour	
		PV06	Pre-Vocational (6:1)	T2015	U7	U5	U6		\$4.96	1.00/Hour	
		PVO8	Pre-Vocational (8:1)	T2015	U7	U5	UA		\$4.96	1.00/Hour	
		PV10	Pre-Vocational (10:1)	T2015	U7	U5	UB		\$4.96	1.00/Hour	
		PV12	Pre-Vocational (12:1)	T2015	U7	U5	UC		\$3.15	1.00/Hour	
		PV14	Pre-Vocational (14:1)	T2015	U7	U5	UD		\$3.15	1.00/Hour	
		PV16	Pre-Vocational (16:1)	T2015	U7	U5	U9		\$3.15	1.00/Hour	
		PSTF	Psychological Therapy, Family	90846	U7	U5			\$17.27	.25/Hour	
		PSTG	Psychological Therapy, Group	90853	U7	U5			\$4.81	.25/Hour	
		PSTI	Psychological Therapy, Individual	H0004	U7	U5	U3		\$15.45	.25/Hour	
		RETH	Recreational Therapy	H2032	U7	U5	U2		\$10.78	.25/Hour	
		R&F	Rent & Food for Unrelated Live-In Caregiver	T2025	U7	U5			\$545.00	1.00/Month	
		RH1O	Residential Habilitation Services, Level 1 (35 or Less Hrs/Week)	T2016	U7	U5	UA		\$26.15	1.00/Hour	
		RH2O	Residential Habilitation Services, Level 2 (Over 35 Hrs/Week)	T2016	U7	U5			\$21.97	1.00/Hour	

Division of Disability & Rehabilitative Services • Bureau of Developmental Disabilities Services

		INsite		Natl.						Unit/	Unit/\$
FSW	CIH	Code	Service Description	Code	1	2	3	4	Rate	Size	Limit
		RD1	RHD Daily Level 1 (2 Person Setting, Algo Level 3)	T2016	U7	U5	UN	UA	\$171.33	1.0/Day	1 Unit/Day
		RD2	RHD Daily Level 2 (2 Person Setting, Algo Level 4)	T2016	U7	U5	UN	UB	\$241.63	1.0/Day	1 Unit/Day
		RD3	RHD Daily Level 3 (2 Person Setting, Algo Level 5)	T2016	U7	U5	UN	UC	\$263.59	1.0/Day	1 Unit/Day
		RD4	RHD Daily Level 4 (3 Person Setting, Algo Level 3)	T2016	U7	U5	UP	UA	\$171.33	1.0/Day	1 Unit/Day
		RD5	RHD Daily Level 5 (3 Person Setting, Algo Level 4)	T2016	U7	U5	UP	UB	\$221.85	1.0/Day	1 Unit/Day
		RD6	RHD Daily Level 6 (3 Person Setting, Algo Level 5)	T2016	U7	U5	UP	UC	\$241.63	1.0/Day	1 Unit/Day
		RD7	RHD Daily Level 7 (4 Person Setting, Algo Level 3)	T2016	U7	U5	UQ	UA	\$160.35	1.0/Day	1 Unit/Day
		RD8	RHD Daily Level 8 (4 Person Setting, Algo Level 4)	T2016	U7	U5	UQ	UB	\$206.47	1.0/Day	1 Unit/Day
		RD9	RHD Daily Level 9 (4 Person Setting, Algo Level 5)	T2016	U7	U5	UQ	UC	\$219.66	1.0/Day	1 Unit/Day
		RNUR	Respite Nursing Care, RN	T1005	U7	U5	TD		\$7.79	.25/Hour	
		RNUR	Respite Nursing Care, LPN	T1005	U7	U5	TE		\$5.91	.25/Hour	
		RSPO	Respite Care Services	S5151	U7	U5			\$26.15	1.00/Hour	
		ATCH	Specialized Medical Equip/Supply, Install	T2029	U7	U5	NU		Individual	1.00/Unit	
		ATCH	Specialized Medical Equip/Supply, Install	T2029	U7	U5	NU		Individual	1.00/Unit	\$7,500 Lifetime
		ATCM	Specialized Medical Equip/Supply, Maintain	T2029	U7	U5	U8		Individual	1.00/Unit	\$500/Year
		SPTH	Speech Therapy	92507	U7	U5	UA		\$18.12	.25/Hour	
		AF01	Structured Family Caregiving, Level 1	T2033	U7	U5	U1		\$51.87	1.00/Day	1 Unit/Day
		AF02	Structured Family Caregiving, Level 2	T2033	U7	U5	U2		\$75.67	1.00/Day	1 Unit/Day
		AF03	Structured Family Caregiving, Level 3	T2033	U7	U5	U3		\$102.87	1.00/Day	1 Unit/Day
		TRNO	Transportation	T2002	U7	U5			\$5.25	1.00/Trip	2 Trips/Day
		TRNO	Transportation, Level 1	T2002	U7	U5			\$5.25	1.00/Trip	2 Trips/Day, \$2,625/Year
		TRN2	Transportation, Level 2	T2002	U7	U5	U2		\$21.00	1.00/Trip	2 Trips/Day, \$5,250/Year
		TRN3	Transportation, Level 3	T2002	U7	U5	U3		\$42.00	1.00/Trip	2 Trips/Day, \$7,875/Year
		VMOD	Vehicle Modification, Install	T2039	U7	U5			Individual	1.00/Unit	\$15,000 Lifetime
		VMOD	Vehicle Modification, Install	T2039	U7	U5			Individual	1.00/Unit	\$7,500 Lifetime
		VMOM	Vehicle Modification, Maintain	T2039	U7	U5	U8		Individual	1.00/Unit	\$500/Year
		WEL1	Wellness Coordination Tier 1	T2022	U7	U5	U1		\$52.77	1.00/Month	1 Unit/Month
		WEL2	Wellness Coordination Tier 2	T2022	U7	U5	U2		\$111.96	1.00/Month	1 Unit/Month
		WEL3	Wellness Coordination Tier 3	T2022	U7	U5	U3		\$223.92	1.00/Month	1 Unit/Month
		WPA	Workplace Assistance	T1020	U7	U5			\$27.69	1.00/Hour	