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**To: All Developmental Disabilities Waiver Providers and All Entities Providing Targeted Case Management to Persons with Developmental Disabilities**

**Subject: Home and Community Based Services Waiver Claims Information for the Developmental Disabilities Waiver**

## Overview

The purpose of this bulletin is to notify Developmental Disabilities (DD) Waiver Program providers and targeted case managers (TCMs) that effective November 1, 2002, the claims payment process is being changed to include a linkage between submitted claims and services authorized on members' plans of care/cost comparison budgets (POC/CCBs). Therefore, all POC/CCBs must be current effective November 1, 2002.

## Developmental Disabilities Waiver Claims Processing Against Plans of Care/Cost Comparison Budgets

Currently the DD Waiver procedure codes reimbursed through IndianaAIM do not include the member specific limits documented on the authorized POC/CCB. For dates of service on or after November 1, 2002, DD Waiver claims will be adjudicated as follows:

- If the units billed exceed the POC/CCB authorized units, the claim will pay up to the authorized units.
- If the amount billed exceeds the POC/CCB authorized amount, the claim will pay up to the authorized amount.
- If the amount billed differs from the Indiana Health Coverage Programs (IHCP) allowed amount (where there is a max fee, for example, unit rate), the claim will pay the lesser of the billed amount or the max fee amount.
- If a service has an annual cap and the provider bills for the service, the claim will pay the lesser of the billed amount or the annual cap (for example, community educational/therapeutic activity).
- If the billed amount or units is for dates of service outside start or stop dates in the authorized POC/CCB, the claim will deny.
- If there is no current POC/CCB on file, the claim will deny.

Due to these changes in the claims payment process, TCMs are required to have current approved POC/CCBs for all members on their caseload effective November 1, 2002, and to ensure that these plans remain current. Providers' claims will not be paid if a current plan of care is not on file. Therefore, after November 1, 2002, providers with outdated POC/CCBs should not bill for services because those claims will be denied. Providers who are providing services for members with an outdated POC/CCB and those who have claims denied for dates of service after November 1, 2002, should immediately contact the Bureau of Developmental Disabilities Services DD Waiver Program via email at [kstovall@fssa.state.in.us](mailto:kstovall@fssa.state.in.us) or [hwages@fssa.state.in.us](mailto:hwages@fssa.state.in.us).

Table 1 lists the DD Waiver procedure codes with the edits and audits that will be added to IndianaAIM for dates of service effective November 1, 2002.

Table 1 - Updated Waiver Procedure Codes

<b>DD Waiver</b>				
<b>Service</b>	<b>Procedure Code</b>	<b>Unit</b>	<b>Cap Rate</b>	<b>Audit Criteria</b>
Adult Day Services Level 1 (½ day)	Z5114	.5 day	\$20.90	Max 2 units/day, annual max of units listed on POC
Adult Day Services Level 1 (¼ hour)	Z5115	.25 hour	\$1.31	Max 16 units/day, annual max of units listed on POC
Adult Day Services Level 2 (½ day)	Z5116	.5 day	\$27.43	Max 2 units/day, annual max of units listed on POC
Adult Day Services Level 2 (¼ hour)	Z5117	.25 hour	\$1.71	Max 16 units/day, annual max of units listed on POC
Adult Day Services Level 3 (½ day)	Z5118	.5 day	\$32.66	Max 2 units /day, annual max of units listed on POC
Adult Day Services Level 3 (¼ hour)	Z5119	.25 hour	\$2.04	Max 16 units/day, annual max of units listed on POC
Adult Day Services Transportation - One Way Trip	Z5120	1 way trip	\$16.25	Max 2 units/day, annual max of units listed on POC
Behavior Management	Z5726	.25 hour	\$17.38	Annual max of units listed on POC
Community Educational/Therapeutic Activity	Z5158	1 unit	\$2,000.00	1 unit is actual cost, annual max cost listed on POC up to \$2,000 per rolling calendar year
<b>Community Habilitation and Participation</b>				
Community Habilitation and Participation-Community Based Individual	Z5163	1 hour	\$27.58	Monthly max of units listed on POC
Community Habilitation and Participation-Community Based Group	Z5164	1 hour	\$6.68	Monthly max of units listed on POC
Community Habilitation and Participation-Facility Based Individual	Z5165	1 hour	\$27.58	Max 1 unit/day, monthly max of units listed on POC
Community Habilitation and Participation-Facility Based Group	Z5166	1 hour	\$5.34	Monthly max of units listed on POC
Crisis Intervention	Z5177	1 day		Rate established by DDARS with provider. Max 1 unit/day, annual max of units listed on POC

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Table 1 - Updated Waiver Procedure Codes

<b>Community Habilitation and Participation</b>				
<b>Service</b>	<b>Procedure Code</b>	<b>Unit</b>	<b>Cap Rate</b>	<b>Audit Criteria</b>
Driver (agency) - 1 person	Z5173	1 hour	\$15.88	Annual max of units listed on POC
Driver (agency) - 2-4 people	Z5174	1 hour	\$5.03	Annual max of units listed on POC
Driver (agency) - 5-8 people	Z5175	1 hour	\$2.38	Annual max of units listed on POC
Driver (agency) - 9 or more	Z5176	1 hour	\$1.35	Annual max of units listed on POC
Environmental Modifications/Specialized Medical Equipment Supplies- Assessment/Inspection/Training	Z5144	.25 hour	\$17.99	Annual max of units listed on POC
Environmental Modifications Initial	X3019	1 unit		1 unit is actual cost, annual max cost listed on POC up to \$15,000 per lifetime
Environmental Modifications Maintenance	X3020	1 unit	\$300.00	1 unit is actual cost, annual cost listed on POC up to \$300 per rolling calendar year
Family and Caregiver Training	Z5024	1 unit	\$2,000.00	1 unit is actual cost, annual max listed on POC up to \$2,000 per rolling calendar year
Health Care Coordination	Z5143	1 hour	\$48.06	Max 4 units/month, annual max of units listed on POC
Music Therapy- Individual	Z5156	.25 hour	\$10.78	Annual max of units listed on POC
Nutritional Counseling	Z5149	.25 hour	\$14.47	Annual max of units listed on POC
Occupational Therapy (HHA)	X3015	.25 hour	\$17.99	Annual max of units listed on POC
Occupational Therapy (IDDARS-Hab Agency/Other)	X3016	.25 hour	\$17.99	Annual max of units listed on POC
Personal Emergency Response System Monthly Charge	Z5620	1 month	\$52.07	Annual max of units listed on POC
Personal Emergency Response System Installation	Z5699	1 unit	\$52.07	Annual max of units listed on POC
Physical Therapy (HHA)	X3017	.25 hour	\$18.12	Annual max of units listed on POC
Physical Therapy (IDDARS-Hab Agency/Other)	X3018	.25 hour	\$18.12	Annual max of units listed on POC
Pre-Vocational Services	X3011	.25 hour	\$1.20	Annual max of units listed on POC
Psychological Therapy - Individual	Z5146	.25 hour	\$15.45	Annual max of units listed on POC

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Table 1 - Updated Waiver Procedure Codes

<b>Community Habilitation and Participation</b>				
<b>Service</b>	<b>Procedure Code</b>	<b>Unit</b>	<b>Cap Rate</b>	<b>Audit Criteria</b>
Psychological Therapy - Family	Z5147	.25 hour	\$17.27	Annual max of units listed on POC
Psychological Therapy - Group	Z5148	.25 hour	\$4.81	Annual max of units listed on POC
Recreational Therapy -Individual	Z5157	.25 hour	\$10.78	Annual max of units listed on POC
Rent/Food Expenses of Unrelated Live-In Caregiver	Z5160	1 month	\$545.00	Max 1 unit/month, annual max of units listed on POC
<b>Residential Habilitation and Support</b>				
Residential Habilitation and Support Fewer than 35 hours per week	Z5170	1 hour	\$19.49	Monthly max of units listed on POC
Residential Habilitation and Support Fewer than 35 hours per week - QMRP	Z5171	1 hour	\$24.49	Max 10 units/month, monthly max of units on POC
Residential Habilitation and Support 35+ hours per week	Z5172	1 hour	\$17.59	Monthly max of units on POC
Residential Habilitation and Support Daily Rate	Z5178	1 day		Daily rate established on POC, monthly max of units listed on POC
<b>Respite Care</b>				
Respite (Personal Assistance HHA/HSA)	Z5606	1 hour	\$16.00	Annual max of units listed on POC
Respite (Home Health Aide HHA)	Z5607	1 hour	\$16.00	Annual max of units listed on POC
Respite (LPN HHA)	Z5608	1 hour	\$23.64	Annual max of units listed on POC
Respite (RN HHA)	Z5609	1 hour	\$31.14	Annual max of units listed on POC
Respite (Personal Assistance DDARS ILS)	Z5720	.5 hour	\$7.94	Annual max of units listed on POC
Respite (Personal Assistance Non-Agency)	Z5655	1 hour	\$9.79	Annual max of units listed on POC
Respite Group Setting	Z5951	1 hour	\$5.99	Annual max of units listed on POC
Respite (Adult Day Services Level 1) ½ Day	Z5133	.5 day	\$20.90	Max 2 units/day, annual max of units listed on POC
Respite (Adult Day Services Level 1) .25 Hour	Z5134	.25 hour	\$1.31	Max 16 units/ day, annual max of units listed on POC
Respite (Adult Day Services Level 2) ½ Day	Z5135	.5 day	\$27.43	Max 2 units/day, annual max of units listed on POC
Respite (Adult Day Services Level 2) .25 Hour	Z5136	.25 hour	\$1.71	Max 16 units/day, annual max of units listed on POC

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Table 1 - Updated Waiver Procedure Codes

Service	Procedure Code	Unit	Cap Rate	Audit Criteria
<b>Respite Care</b>				
Respite (Adult Day Services Level 3) ½ Day	Z5137	.5 day	\$32.66	Max 2 units/day, annual max of units listed on POC
Respite (Adult Day Services Level 3) .25 Hour	Z5138	.25 hour	\$2.04	Max 16 units/day, annual max of units listed on POC
Respite (Adult Day Services Transportation One Way)	Z5139	1 way trip	\$16.25	Max 2 units/day, annual max of units listed on POC
Specialized Medical Equipment and Supplies-Initial	X3013	1 unit		1 unit is actual cost, annual max of cost listed on POC
Specialized Medical Equipment and Supplies-Maint.	X3014	1 unit		1 unit is actual cost, annual max of cost listed on POC
Speech and Language Therapy (HHA)	Z5708	.25 hour	\$18.12	Annual max of units listed on POC
Speech and Language Therapy (IDDARS/Hab Agency/Other)	Z5715	.25 hour	\$18.12	Annual max of units listed on POC
Supported Employment	X3012	.25 hour	\$9.17	Annual max of units listed on POC
Transportation	Z5142	1 month	\$300.00 max.	Max \$300/month, annual max of cost listed on POC

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