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ADMINISTRATIVE MEMORANDUM - #2007-01

**To: Executive Directors of Agencies providing Supported Employment Services
Executive Directors of Agencies providing Medicaid Service Coordination**

From: Max Chmura, Executive Deputy Commissioner

**James F. Moran, Deputy Commissioner
Administration and Revenue Support**

**Gary Lind, Director
Policy, Planning and Individualized Initiatives**

**Subject: SUPPORTED EMPLOYMENT SERVICE DELIVERY AND
DOCUMENTATION REQUIREMENTS**

Date: November 15, 2007

Suggested Distribution:

Program/Service Staff
Quality/Compliance Staff
Billing Department Staff
MSC Service Coordinators

Purpose:

Effective January 1, 2008, this Administrative Memorandum replaces ADM 2002-02. In particular, there are changes to the Supported Employment Billing Standards, General Documentation Requirements and Fiscal Audit sections. The criteria described in this document apply to Supported Employment services rendered to Home and Community Based Service (HCBS) waiver enrolled individuals as well as to non-waiver enrolled individuals.

The service documentation requirements set forth in this Administrative Memorandum supersede fiscal audit service documentation requirements addressed in The Key to Individualized Services (1997), OMRDD's HCBS waiver policy manual. Quality service standards remain the same.



Background:

18 NYCRR, Section 504.3(a) states that by enrolling in the Medicaid program, “the provider agrees...to prepare and to **maintain contemporaneous records** demonstrating its right to receive payment under the medical assistance program and to **keep for a period of six years from the date the care, services or supplies were furnished, all records** necessary to disclose the nature and extent of services furnished and all information regarding claims for payment submitted by, or on behalf of, the provider and to furnish such records and information, upon request, to...the Secretary of the United States Department of Health and Human Services, the Deputy Attorney General for Medicaid Fraud Control and the New York State Department of Health.” (emphasis added) It should be noted that there are other entities with rights to audit Medicaid waiver claims as well, including the New York State Office of the Medicaid Inspector General (OMIG) and OMRDD.

The regulatory basis for HCBS Waiver Supported Employment is in 14 NYCRR subdivision 635-10.4(d) and 635-10.5(d).

Supported Employment Billing Standards:

Supported Employment services assist individuals in finding and maintaining employment that is meaningful to them. The unit of service for Supported Employment is a calendar month. There are different standards for Supported Employment billing for persons who are employed during the month and for those not employed during the month.

Requirements for billing depend on the employment status of the person served:

- 1) **To bill for a month of Supported Employment** when the person is **employed for the full calendar month**, the Supported Employment staff must provide at least two services face-to-face, with each service provided on a separate day of the month. Each of the services must be drawn from the person’s Supported Employment Plan. Additionally, these face-to-face services **must** be provided at the person’s job site.
- 2) **To bill for a month of Supported Employment** when the person is **not employed at any time** during the month, the Supported Employment staff must actively engage in preparatory and placement activities which are designed to lead to employment or re-employment. The Supported Employment staff must provide at least **four** documented Supported Employment services, with each service provided on a separate day of the month. The services must be drawn from the person’s Supported Employment Plan. Of these four services, two must involve face-to-face contacts with the person.
- 3) **In cases where a person is employed during a portion of the month** (that is, employed for less than **the full calendar month**), the Supported Employment provider may bill for a month of Supported Employment services as long as one of the following is true:

- The Supported Employment staff person delivers and documents at least two face-to-face services provided to the person at the job site during the month, with each face-to-face service delivered on a separate day, **or**
- The Supported Employment staff person delivers and documents at least four services provided on separate days of the month. Two of the required four services must involve face-to-face contact with the person. The two face-to-face services need not be delivered at the job site.

Special Notes:

- A) Payment for Supported Employment services is contingent upon prior authorization from the DDSO/NYCRO, for each person served.
- B) Only **one** provider of Supported Employment services may claim for a service for an eligible person in a given calendar month. Where a person has claims from multiple providers in a given month, OMRDD will determine which provider is authorized to bill Supported Employment for the month and the unauthorized claim will be subject to void.
- C) Required face-to-face Supported Employment services cannot be delivered when the person is admitted to an institutional setting (for example, nursing home or hospital). Also, required face-to-face Supported Employment services cannot be delivered at the same time the person is receiving another non-residential Medicaid service (for example, Day Habilitation). For service coordination purposes, Supported Employment and Medicaid Service Coordination (MSC) overlaps are permitted. Every effort should be made by the MSC to avoid visiting with the person at the worksite.

Policy on Service Delivery “Location Waivers”:

For people who are employed, Supported Employment policy requires that Supported Employment staff provide face-to-face documented services at the person’s work site. In rare situations, if the employed individual does not want the job coach to visit him/her at the work site, the Supported Employment Agency can request a “Location Waiver” from the work-site visit. The agency must send the request to the DDSO Supported Employment Coordinator stating the reason the person served does not want the job coach to come to the work site, as well as identifying the supports and services that will be provided to assist the person in achieving his/her valued outcomes related to employment. The DDSO will determine if the “Location Waiver” will be granted. If a “Location Waiver” is granted, the Supported Employment Agency must maintain a copy of the waiver with the appropriate DDSO staff signature in the person’s record. This “Location Waiver” documentation is subject to audit.

Service Documentation Requirements:

Documentation of each service required for monthly billing must include the following daily service note elements:

1. The person's name and Medicaid number (CIN). (Note that the CIN need not be included in daily documentation, rather it can appear in the person's Supported Employment Plan).
2. Identification of category of waiver service provided (that is, Supported Employment).
3. The date the Supported Employment service was provided.
4. **A description of the individualized service provided by Supported Employment staff**, which is based on the person's Supported Employment Plan. The service note must demonstrate an action by the Supported Employment staff (for example, the staff person documents that she "instructed the person on how to answer common job interview questions").
5. An indication as to whether the service was delivered in a "**face-to-face**" contact with the person.
6. The person's response to the service (for example, the staff person documents that "based on the staff person's instructions on answering common interview questions, the person was successful in her job interview."). The person's response must be documented in a monthly summary note or a provider may choose to include the person's response each time a Supported Employment service is rendered.
7. Location of the service provided, including a notation as to whether or not the service was provided at the person's job site.
8. Verification of service provision **by the Supported Employment staff person delivering the service**. That is, the Supported Employment staff person who delivered the service must sign, provide his/her work title, and include the date the service note was written, thus verifying that the service was delivered. (The date the note was written must be "contemporaneous" to the date the Supported Employment service was provided. "Contemporaneous" is defined as "at the time the service was delivered or shortly after.")
9. As necessary, documentation verifying that the DDSO has granted a waiver of work-site visits (see "Policy on Service Delivery Location Waivers" on page 3).

Note: The above elements must be included in each of the required daily service notes that substantiate a Supported Employment claim. In addition to the above requirements, at least once a month in a daily service note or in the monthly summary note, Supported Employment staff must describe the person's progress in meeting the expectations specified in his/her Supported Employment Plan and address any special issues or concerns the person may have. For example, "John has learned to take the bus to work" or "As previously instructed by her job coach, Sally asked permission of her supervisor before she left on her 10 minute break every day this week."

General Documentation Requirements:

In addition to the service notes supporting each monthly Supported Employment claim, the Supported Employment Agency must maintain the following documentation:

- For people receiving MSC and/or who are enrolled in the HCBS waiver, a copy of the person's **ISP**, covering the time period of the payment claim, developed by the person's Medicaid Service Coordination (MSC) or Plan of Care Support Services (PCSS) service coordinator. The ISP must include the following elements:
 1. The category of waiver service provided (that is, Supported Employment) and identification of the Supported Employment Agency delivering the service as provider of the service.
 2. Valued Outcomes of the person receiving services (that is, the person's objectives in participating in Supported Employment).
 3. Frequency and duration. The ISP must specify that the frequency of Supported Employment is "monthly" and specify that the duration is "ongoing."
 4. The effective date for Supported Employment services (that is, the date the person was enrolled in Supported Employment services). This date must be on or before the first date of service that the Supported Employment Agency bills for Supported Employment services.

- For all people receiving Supported Employment services, the **Supported Employment Plan** developed by the Supported Employment Agency. The plan must cover the time period of the payment claim. The following elements must be included in the Supported Employment Plan:
 1. The person's **(a) name and (b) Medicaid Identification Number (CIN)**, if the person is a Medicaid enrollee.
 2. The category of waiver service provided (that is, Supported Employment) and designation of the agency providing the Supported Employment service as the provider of the service.
 3. Valued Outcomes of the person receiving services (For people with an ISP, the valued outcomes are derived from the ISP).
 4. Date on which the plan was last reviewed (Reviews must be performed every six months.)
 5. Anticipated level of support (for example, for an employed person, "Supported Employment staff will provide 2 services at the job site").
 6. Locations where the service will be provided (for example, job site or at the person's home).
 7. Description of the individualized Supported Employment services.
 8. If necessary, safeguards to be taken by the provider to ensure the person's health and safety.
 9. Signature and title of the Supported Employment staff person writing the Supported Employment Plan and the date the plan was written. Further, for each required six month review of the Supported Employment Plan, evidence that the review was conducted which includes the signature and title of the Supported

Employment staff who conducted the review and the date of the review and any changes in the Supported Employment Plan.

Documentation Retention:

All documentation specified above, including ISPs, Supported Employment Plans, and daily service notes, **must be retained for a period of at least six years from the date of the service billed.**

Fiscal Audit:

For those services delivered on or after October 1, 2001 through December 31, 2007 OMRDD is reviewing Supported Employment service claims utilizing the service delivery and documentation requirements contained in Administrative Memorandum #2002-02. For services delivered on or after January 1, 2008 Supported Employment claim documentation must be in compliance with this ADM.

In a fiscal audit, a Supported Employment monthly claim will be selected and the Auditor will typically ask for the ISP (for waiver-enrolled people) and the Supported Employment Plan, both of which were in effect for the claim date. The auditor will also require, for the claim dates sampled, the service notes as described above. In reviewing the service notes, the auditor will determine whether the sampled claim conforms to the "Supported Employment Billing Standards" specified on pages 2 and 3 of this Administrative Memorandum. For example, for a person who had a job during the entire month of the sampled monthly claim, the auditor will determine whether the service note demonstrates that at least two face-to-face services were provided at the person's job site.

For additional information on the documentation requirements or to request samples of documentation formats, contact Ms. Kate Marlay, of Training and Medicaid Standards at (518) 408-2096, Mr. Kevin O'Dell, Director of Waiver Management at (518) 474-5647, or Ms. Joanne Bushart, Coordinator for Day and Employment Services at (518) 474-8652 .

cc: DDSO Directors
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