



April 24, 2020

Extension of Interim Billing Guidance for Providers of Day Habilitation, Prevocational and Day Treatment Services Regarding Emergency Response to COVID-19 through April 15, 2020

This document provides temporary billing guidance for Office for People With Developmental Disabilities (OPWDD) certified providers of Day Habilitation, Prevocational, and Day Treatment services, as it relates to the COVID-19 emergency response efforts. Effective with the March 18, 2020, suspension of these Day Habilitation, Day Treatment, and Prevocational Services, the following flexibility is available to providers to ensure continuation of services, to the extent possible, and to allow agencies to reassign staff to provide essential services to individuals with intellectual and developmental disabilities.

Retainer payments include the goal of maintaining a stable workforce to facilitate essential services or the reassignment of staff, as needed. Accordingly, providers are not eligible for retainer payments during a month where the provider laid off or furloughed direct support, support, and clinical staff who were directly involved in the provision of the service covered by the retainer.

This guidance will govern claims for service dates of March 18, 2020 through April 15, 2020. Further direction will be forthcoming on long-term billing guidance.

Retainer Day Payments for Day Habilitation and Prevocational Services Providers

Effective March 18, 2020, Day Habilitation, Prevocational Services, and Day Treatment providers, may bill Medicaid for *retainer day payments* for individuals who:

- Are authorized by OPWDD to receive Day Habilitation, Prevocational, and/or Day Treatment services from your agency; and
- Were actively receiving Day Habilitation, Prevocational, and/or Day Treatment services from your agency at the time of the mandated temporary suspension of services.

Retainer day payments may be billed to Medicaid in accordance with the individual's existing schedule for participating in your agency's Day Habilitation, Prevocational and/or Day Treatment services. For example, if your agency normally provided a full unit of Day Habilitation on Monday, Wednesday and Friday each week, claims should be submitted for these days when services were typically rendered. Providers are still held to regulatory standards at NYCRR 635 - 10.5 that limit the amount of service that can be billed daily. This is particularly important for individuals who attend multiple programs from different provider agencies who are billing retainer day payments, as system billing edits limit the amount of service that can be billed on a given day.

Claim Submission for Retainer Day Payments

Retainer day payments should be billed as follows:

- Use existing Provider ID for Day Habilitation, Prevocational, and/or Day Treatment services;
- Use existing rate codes for half and/or full units of Day Habilitation, Supplemental Day

- Habilitation, site-based Prevocational and/or Day Treatment services;
- Use the existing_rate code for 15-minute units of community-based Prevocational Services;
 - Use existing locator code; and
 - Use revenue code: “0180 - Leave of Absence”.

The Revenue Code of 0180 identifies the claim as a Retainer day and indicates that the agency may not have service documentation as required in Administrative Memorandum (ADM): *Group Day Habilitation Service and Supplemental Group Day Habilitation Documentation Requirements 2006-01, Prevocational Services 2020-01, and Day Treatment Billing Standards 2008-02.*

Supporting Families During the COVID-19 Emergency

OPWDD expects that Day Habilitation, Prevocational, and Day Treatment services providers will continue to support individuals and their families during this crisis and will use the revenue from the Retainer day payments to support these efforts. Day Habilitation, Prevocational, and Day Treatment services providers have flexibility to determine how to safely support the individuals and the families they serve. For example, providers may elect to provide face-to-face services, to have staff engage the individual using the telephone or other technology or offer other non-face-to-face supports (i.e., delivery of food or essential supplies). These supports to individuals and families do not need to be provided on each day a retainer day is billed, but should be provided on a weekly basis, at least, or more frequently, if needed.

Further Guidance and Next Steps

OPWDD is working the federal Centers for Medicare and Medicaid Services to provide flexibility in funding during the suspension of Day Habilitation, Day Treatment and Prevocational services. Additional guidance will be forthcoming, but agencies are encouraged to re-hire and/or re-assign current staff to provide essential services to the individuals and families served.