

## CES waiver and ADDT/EIDT rates

### CES waiver rate process

For the past several months, Summit Community Care worked closely with key leaders and stakeholders to develop a new payment structure for the Community and Employment Services (CES) Waiver Program since there is no established fee schedule under Medicaid. We published most of our rates in October and December 2019 and worked alongside the other Provider-Led Arkansas Shared Savings Entities and the Department of Health Services to establish a uniform set of modifiers to be used in the new payment system. Since the original plan to move all providers to the new rates on January 1, 2020, was unrealistic, we worked with an initial first group of providers who volunteered to phase in these new rates and processes in a purposeful way during the first several months of 2020. This transition to the new rates will allow us to address all person-centered service plans, authorizations, configurations, and education and testing needs. The new payment methodology and rates will be implemented for all CES waiver providers no later than June 30, 2020.

Accompanying this update, you will find a full waiver grid that defines all services, unit definitions and rates. As we phase in providers, we will offer a tool for each set of providers to be used for the submission of member-specific requests to our Utilization Management (UM) department. This tool may be revised during the phase-in based on provider input, but it will be used going forward for all waiver prior authorization requests.

**For providers not participating in these initial phases, there is *no* change in our requirements for CES waiver billing methodology.**

During each phased rollout, we will meet with the selected providers to review the full process and establish a new go-live date for that group. During the transition period, the providers will receive a list of members and ensure it is accurate. Care coordinators and health plan leaders will work alongside provider groups to ensure all authorization requests are in place, and UM staff will send authorizations to providers prior to each go-live date. We will build in time for continued meetings and education along the way. While all CES waiver providers must transition to these new rates before July 1, 2020, we hope to move providers much sooner.

We understand that the minimum wage increase on January 1, 2020, impacts some of you. Because the new rates account for these changes, our hope is that we can drive many of you to the new methodology very quickly. However, if you are not in the first or second wave of transition, we can discuss temporary revisions to existing plans where the rate was calculated with an hourly rate for staff who were paid less than \$10/hour on December 31, 2019. Please follow the processes outlined earlier this year for those submissions. If you have any questions or have a preference regarding the phase in

which you would like to participate, please contact us soon at [lacee.brown@summitcommunitycare.com](mailto:lacee.brown@summitcommunitycare.com) or [jason.miller@summitcommunitycare.com](mailto:jason.miller@summitcommunitycare.com).

### **ADDT/EIDT fee schedule changes**

Summit Community Care received a fee schedule update from the state on January 10, 2020, that increases the daily rates for adult developmental day treatment (ADDT) and early intervention day treatment (EIDT) by 11 percent. Summit Community Care will honor these increases in accordance with your provider contract. Once we complete configuration of these new rates, we will adjust previously processed claims for dates of service January 1, 2020, and beyond. Providers will not be required to dispute or resubmit any previously processed claims. The configuration and adjustment project should take no longer than 90 days.

**Updated as of JANUARY 30, 2020**

Code	Modifier 1	Modifier 2	Code Description	Unit Definition	Rate	Annual Max/ Benefit Limit	Prior Authorization Required
H2016			<p><b>Supportive Living:</b></p> <ul style="list-style-type: none"> <li>– Current budgeted approved rates</li> <li>– Individually tailored services and activities to enable members to reside successfully in the community, to include care, supervision and activities that directly relate to goals and objectives in the member's PCSP.</li> <li>– Supervision and activities may include: decision making, money management, daily living skills, socializations, community integration experiences, mobility, communication, behavior shaping and management, companion activities, health maintenance activities.</li> </ul>	Daily Rate	Daily Rate	Currently Approved Budget	Y
H2016	UF		<p><b>Supportive Living:</b></p> <ul style="list-style-type: none"> <li>– one on one staffing — level 1</li> <li>– Level 1: Member who generally needs no more than 8 hours of SL per day (56 hours per week maximum), has natural supports, able to work or attend day treatment, functions more independently with other lower level interventions of support.</li> </ul>	Per 15 Minutes	\$5.25/Unit (\$21/Hour)	11,680 Units (2,920 Hours)	Y
H2016	UH		<p><b>Supportive Living:</b></p> <ul style="list-style-type: none"> <li>– One on one staffing — level 2</li> <li>– Level 2: Member who generally needs 9-16 hours of SL per day (112 hours per week maximum), does not require 24 hour level of care, has some natural supports, able to attend some alternative programming, goals support working towards independence as a possibility.</li> </ul>	Per 15 Minutes	\$4.75/Unit (\$19/Hour)	23,360 Units (5,840 hours)	Y

H2016	U3		<b>Supportive Living:</b> – One on one staffing — level 3 – Level 3: Member who generally needs highest level of care, up to 24 hours of SL per day (168 hours per week maximum), significant assistance and support needed due to severity of disability, limited ability to attend alternative programming, limited natural supports, goals do not support movement towards independence.	Per 15 Minutes	\$4.38/Unit (\$17.50/Hour)	35,040 Units (8,760 Hours)	Y
H2016	U1	UQ	<b>Supportive Living:</b> – Shared staffing – Up to 4 members (level 1) – Cost efficient SL option that fosters independence	Per 15 Minutes	\$3/unit (\$12/hour)	Limit is inclusive of the member's one on One need level benefit (H2016 UF, H2016 UH, or H2016 U3)	Y
H2016	U2	UR	<b>Supportive Living:</b> – Shared staffing – 5-8 members level 2 – Cost efficient SL option that fosters independence.	Per 15 Minutes	\$2.50/unit (\$10/hour)	Limit is inclusive of the member's one on One need level benefit (H2016 UF, H2016 UH, or H2016 U3)	Y
H2016	U3	UQ	<b>Supportive Living:</b> – Shared staffing (custom) — Level 3 up to 4 members			NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE
H2016	U4		<b>Supportive Living:</b> – One on one staffing — level 4			NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE
H2016	U4	UR	<b>Supportive Living:</b> – Shared staffing (Custom) – Level 4 5 - 8 members			NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE
H2016	U5		<b>Supportive Living:</b> – One on one staffing – level 5			NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE
H2016	U5	US	<b>Supportive Living:</b> – Shared home monitoring — level 5 – Supportive living services provided in <b>1 : 9 or more ratio</b> to assist members with urgent or emergent needs and to ensure safety of members in an effort to prevent transition to higher level of care	Per Diem	\$125.00	365	Y
H2016	UC		<b>Supportive Living:</b> – Companion and Activity Therapy – Use of animals as modalities to motivate members to meet functional goals including language, range of motion, socialization, and development of self-respect, self-esteem, responsibility, confidence and assertiveness.	Pass-thru Cost		\$1,000	Y

<b>H2016</b>	UD		<b>Supportive Living:</b> – Non medical transportation – Transportation to and from community integration experiences.	<b>Per Mile</b>	\$0.51/Mile	5,000 Miles/Year INCLUSIVE of H2016 UD and H2016 UD US	Y
<b>H2016</b>	UD	US	<b>Supportive Living:</b> – Nonmedical transportation – Multi-member transport – Transportation to and from community integration experiences.	<b>Per Mile</b>	\$0.25/mile	5,000 Miles/Year INCLUSIVE of H2016 UD and H2016 UD US	Y
<b>H2016</b>	UK		<b>Supportive Living:</b> – Community (camps, activities, Camp Aldersgate etc. – alternate supportive supervision) – Activities intended to instruct the member in daily and community living in integrated settings.	Pass-thru Cost		\$1,500	Y
<b>H2023</b>			<b>Supported Employment:</b> – Job Coaching – Service designed to help members acquire and keep meaningful jobs in competitive job market. – On-site activities provided once employment is obtained to assist member with learning necessary job skills, analyzing work environment and developing strategies to help member complete job tasks. – A fading plan must be developed to show how goals will be achieved within 12 months.	Per 15 Minutes	\$3.59/Unit	40 hours per week, not to exceed 32 units a day (8 hours) in combination with all other employment services.	Y
<b>H2023</b>	U1		<b>Supported Employment:</b> – Discovery and Career Planning - Service designed to allow for gathering information about member's interests, strengths, skills and types of supports most effective to the member. – Service results in development of Individual Career Profile (ICP) to provide recommendations regarding career needs.	<b>Per 15 Minutes</b>	\$3.59/unit	50 Hours/Week  Over 6 Week Period to Complete Activities and Create ICP	Y

H2023	U2		<p><b>Supported Employment:</b></p> <ul style="list-style-type: none"> <li>– Job Development</li> <li>– Individualized services that are specific in nature to obtaining a certain employment opportunity.</li> <li>– Job Development Plan must be created and incorporated with the Individual Career Profile no later than 30 days after Job Development services begin.</li> <li>– JDP includes short and long term employment goals, target wages, task hours, special conditions that apply to the worksite for the member, jobs or tasks that will be customized or developed through employer, employer contacts, plans for how many employers will be contacted each week, conditions for use of on-site job coaching.</li> </ul>	Outcome Based		<p>Outcome-based Reimbursement, Payable in Stages to Incentive Job Retention.</p> <p>Total Max \$,3000; 60% at end of member's first pay period; 25% after 4 weeks job completion; 15% after 8 weeks job completion.</p>	Y
H2023	U3		<p><b>Supported Employment:</b></p> <ul style="list-style-type: none"> <li>– Employment Path</li> <li>– Time-limited service. Service provides activities that are designed and developed to support employment goals outlined in the PCSP and to help teach skills needed for integrated employment.</li> </ul>	Per 15 Minutes	\$3.59/Unit	<p>25 Hours/Week</p> <p>Alone or in Combination with Job Coaching in Small Group.</p>	Y
H2023	UK		<p><b>Supported Employment:</b></p> <ul style="list-style-type: none"> <li>– Extended Services</li> <li>– Allows for continued monitoring of employment outcomes through regular contact with the beneficiary and employer; minimum contact required of at least once per quarter with employer</li> </ul>	Per 15 Minutes	\$3.59/Unit	<p>20% of Member's Scheduled Work Hours</p>	Y
H2023	UQ		<p><b>Supported Employment:</b></p> <ul style="list-style-type: none"> <li>– Job Coaching Shared Staffing (up to 4 members)</li> <li>– Service designed to help members acquire and keep meaningful jobs in competitive job market.</li> <li>– On-site activities provided once employment is obtained to assist member with learning necessary job skills, analyzing work environment and developing strategies to help member complete job tasks.</li> </ul>	Per 15 Minutes	\$3.59/unit	<p>40 hours per week, not to exceed 32 units a day (8 hours) in combination with all other employment services.</p>	Y

K0108			<p><b>Environmental Modifications:</b></p> <ul style="list-style-type: none"> <li>– Modifications made to the member's place of residence, reflected in the PCSP, that are necessary to ensure the health, welfare and safety of the member or that allows member to function with greater independence and without which, the member would require institutionalization.</li> <li>– Exclusions include modifications which are of general utility and not for a specific medical or habilitative benefit, those which are of aesthetic value only, those that add to the total square footage of the home.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$7,867.50/Year	Y
S5151	U6		<p><b>Respite Services:</b></p> <ul style="list-style-type: none"> <li>– One on one (overnight) — Short-term or temporary direct care to members due to absence or need for relief of non-paid caregivers in order to de-escalate stressful situations.</li> <li>– Respite may be provided at medical or specialized camps, day-care programs, the member's home or private place of residence, respite care provider's home or residence, foster homes, Human Development Center or licensed respite facility.</li> </ul>	Per Diem		NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE
S5151	U6	UN	<p><b>Respite Services:</b></p> <ul style="list-style-type: none"> <li>– Shared staffing (up to 4 members)</li> <li>– Short-term or temporary direct care to members due to absence or need for relief of non-paid caregivers in order to de-escalate stressful situations.</li> <li>– Respite may be provided at medical or specialized camps, day-care programs, the member's home or private place of residence, respite care provider's home or residence, foster homes, Human Development Center or licensed respite facility.</li> </ul>	Per Diem		NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE

<b>S5151</b>	UN		<b>Respite Services:</b> – Shared staffing (up to 4 members) – Short-term or temporary direct care to members due to absence or need for relief of non-paid caregivers in order to de-escalate stressful situations. – Respite may be provided at medical or specialized camps, day-care programs, the member's home or private place of residence, respite care provider's home or residence, foster homes, Human Development Center or licensed respite facility.	<b>Per 15 Minutes</b>	<b>\$3.50/unit (\$14/hour)</b>	256 hours/year (1024 units)	Y
<b>S5151</b>			<b>Respite Services:</b> – One on one – Short-term or temporary direct care to members due to absence or need for relief of non-paid caregivers in order to de-escalate stressful situations. – Respite may be provided at medical or specialized camps, day-care programs, the member's home or private place of residence, respite care provider's home or residence, foster homes, Human Development Center or licensed respite facility.	<b>Per 15 Minutes</b>	<b>\$5.00/unit (\$20/hour)</b>	256 hours/year (1024 units)	Y
S5160			<b>Adaptive equipment:</b> – Personal emergency response system (PERS), installation and testing. – PERS is a stationary or portable electronic device that enables the member to secure help in an emergency. – System must connect to a response center staffed by trained professionals who respond to activation of the device.	Pass-thru Cost	Per Unit Cost	\$7,867.50/Year	Y
S5161			<b>Adaptive equipment:</b> – Personal emergency response system (PERS), service fee, per month, excludes installation and testing.	Pass-thru Cost	Per Unit Cost	\$7,867.50/Year	Y



S5162			<p><b>Adaptive equipment:</b></p> <ul style="list-style-type: none"> <li>– Personal emergency response system (PERS), purchase only.</li> <li>– Item or piece of equipment that is used to increase, maintain, or improve functional capabilities of members to perform daily life tasks that would not otherwise be possible.</li> <li>– Equipment can include enabling technology, such as safe home modifications, that allows member to gain independence, be proactive about their daily scheduled, and integrates member choice through customizable technologies.</li> <li>– PERS enables the member to secure help in an emergency.</li> <li>– Consultation by medical professional must occur to ensure the equipment will meet member's needs.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$7,867.50/Year	Y
<b>S5165</b>	U1		<p><b>CES adaptive equipment:</b></p> <ul style="list-style-type: none"> <li>– Per service</li> <li>– Vehicle modifications to an automobile or van to accommodate the special needs of the member, to enable to member to more fully integrate into the community and to ensure the health, safety and welfare of the member.</li> <li>– Excludes adaptations or modifications to the vehicle that are of general utility and not of direct medical or habilitative benefit OR purchase, down payment, monthly car payment or lease payment or regularly scheduled maintenance of the vehicle.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$7,867.50/Year	Y

T2020	UA		<p><b>Supplemental Support Services (SSS):</b></p> <ul style="list-style-type: none"> <li>– Unforeseen events</li> <li>– Guardianship, snow days, bedbugs</li> <li>– Services to improve or enable the continuance of community living, based on demonstrated needs as identified in the PCSP as unforeseen problems that arise and, unless remedied, could cause a disruption in the member's services or placement, or place the member at risk of institutionalization.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$3,690/Year  Max in Combo with CTS and SMS	Y
T2020	UA	U1	<p><b>Community Transition Services:</b></p> <ul style="list-style-type: none"> <li>– Non-recurring set-up expenses for member who are transitioning from institutional or provider-operated living arrangement, such as an ICF or group home, where the member or his/her guardian is directly responsible for his/her living expenses.</li> <li>– Allowable expenses are those necessary to enable a member to establish a basic household (not including room and board) and may include: security deposits, household furnishings, set-up fees or deposits for utilities, pest-eradication and one-time cleaning prior to occupancy, moving expenses.</li> <li>– Services do not include diversional or recreational items.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$3,690/Year  Max in Combo with SSS and SMS	Y
T2025	U1		<p><b>Consultation Services:</b></p> <ul style="list-style-type: none"> <li>– Behavior Support Plans/Training</li> <li>– Clinical and therapeutic services to assist the member, parents, legally responsible persons, individuals and service providers in carrying out the member's PCSP.</li> <li>– Services are direct in nature, and may include: 1) training or direct care staff or family by a professional consultant in activities to maintain specific behavioral management programs applicable to the member.</li> </ul>	Per Hour	\$136.40/Hour	\$1,320/Year  Inclusive of All Consultation Requests	Y
T2025	U2		<p><b>Consultation Services:</b></p> <p>Eligibility Paperwork</p>	Per Occurrence		NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE	NOT A COVERED BENEFIT FOR SUMMIT COMMUNITY CARE

T2025	U3		<p><b>Consultation Services:</b>  – Providing updated psychological and adaptive behavior assessments in accordance with state requirements by licensed psychological examiner.</p>	Per Hour	\$136.40/Hour	\$1,320/Year  Inclusive of All Consultation Requests	Y
T2025	U4		<p><b>Consultation Services:</b>  – Training of direct service staff and/or family by professionals to support member in goals of PCSP.  – May include:  1) training in the set-up and use of communication devices, computers and software;  2) training to maintain specific behavioral management programs;  3) activities to maintain ST, OT, PT treatment modalities;  4) training for member or family advocacy;  5) training direct staff or family in proper nutrition and special dietary needs.</p>	Per Hour	\$136.40/Hour	\$1,320/Year  Inclusive of All Consultation Requests	Y
T2025			<p><b>Consultation Services:</b>  – Treatment Planning/Participation in PCSP  – Clinical and therapeutic services to assist the member, parents, legally responsible persons, individuals and service providers in carrying out the member's PCSP.  – Services are direct in nature, and may include:  1) screening, assessing and developing therapeutic treatment plans;  2) assisting in the design and integration of overall objectives;  3) providing information to the persons responsible for developing the member's PCSP;  4) consulting with and providing information and technical assistance with other service providers, direct service staff or family members with assistance to carry out the PCSP.</p>	Per Hour	\$136.40/Hour	\$1,320/Year  Inclusive of All Consultation Requests	Y

T2028			<p><b>Specialized Medical Supplies (SMS):</b></p> <ul style="list-style-type: none"> <li>– Items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary for the proper functioning of such items.</li> <li>– Durable and non-durable medical equipment not available under the state plan that is necessary to address functional limitation and is deemed medically necessary by prescribing physician; necessary medical supplies not available under the state plan (the most cost effective item should be considered first); nutritional supplements, non-prescription medications (non-FDA approved meds are excluded), prescription drugs minus the cost of drugs covered by Medicare Part D when extended state plan benefits are exhausted.</li> </ul>	Pass-thru Cost	Per Unit Cost	\$3,690/Year  Max in Combo with SSS and SMS	Y
<b>T2034</b>	UA	U1	<p><b>Crisis Intervention Services:</b></p> <ul style="list-style-type: none"> <li>– Service delivered in a geographic area conducive to rapid intervention, and can be done in the member's place of residence or other local community site depending on where the behaviors are occurring by a mobile intervention team or professional; available 24 hours a day, 365 days a year.</li> <li>– Services targeted to provide technical assistance and training in areas of behavior already identified. Services provided to members age 21 and older.</li> </ul>	<b>Per Hour</b>	\$127.10/Hour Maximum	\$2,640.00/Year	N