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Georgia Department
of Behavioral Health
& Developmental
Disabilities

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Appendix K Extension Provider Updates

April 6, 2021

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Georgia Department of Behavioral Health & Developmental Disabilities



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Agenda

- Update DBHDD Providers on Appendix K Amendment Extension for NOW and COMP waivers
- Office of the Governor Executive Orders
- Department of Public Health Administrative Order
- CDC Guidance

**Note- this presentation and recording is a snapshot in time. Due to the rapidly evolving nature of the public health emergency, additional information and implementation plans may be provided in the future.

Important Links

- The latest COVID-19 guidance from DCH, including the Appendix K Application and Amendments can be found on the Georgia Medicaid website at <https://medicaid.georgia.gov/covid-19> or <https://dch.georgia.gov/>
- DBHDD Appendix K Operational guidelines can be found on policystat at: <https://gadbhdd.policystat.com/policy/8618606/latest/>

Summary of Submission

Appendix K applications submitted to CMS for **extension** of the Year 1 authorities and additions: 2/16/21

Purpose:

- Primary purpose was to request extension of the Year 1 Appendix K approval
- Also amended the previous Appendix K applications as follows:
 - **NOW/COMP Change: provided intent to increase rates in certain specific services**

Request start date of 3/1/2021

Appendix K Extension Span:

- Begin date extends the original approval date to up to 6 months following the end of the Federal Public Health Emergency

Significant Changes in ALL K extension requests

From the DCH Provider Message posted 3/1/21:

- CMS' directive:
 - *Only modification **not eligible** for extension is the use of retainer payments.*
 - *CMS stated in late 2020 that **additional retainer payments will not be approved** in the second year of the PHE.*

Appendix K Allowances- continued

Due to COVID-19, effective 3/1/2020, the state proposed to temporarily:

- Expand setting(s) where services may be provided [K-2.b.iv]
- Allow services to be provided in out of state settings [K-2.b.v]
- Permit payment for services rendered by family caregivers or legally responsible individuals if not already permitted under the waiver [K-2.c]
- Modify provider qualifications and training requirements [k-2.d.i]
- Modify processes for level of care evaluations or re-evaluations [K-2.e]
- Increase payment rates [K-2.f]
- Modify person-centered service plan development process and individual(s) responsible for person-centered service plan development [K-2.g]
- Allow payment for services for the purpose of supporting waiver participants in an acute care hospital or short-term institutional stay [K-2.i]
- ~~Include retainer payments to address services delivered in settings closed in response to the health crisis [k-2.j]~~

At a Glance: telehealth- continued

- **Support Coordination:**
 - Support Coordination uses the *telehealth* model for all contact with the member
 - Support Coordination nurses use the *telehealth* model for assessments, reassessments and all contact with the member
 - ** DBHDD Support Coordination has restarted in-person visits with waiver participants.
- **PT / OT/ ST (NOW and COMP):**
 - Nursing assessments, reassessments, supervision and contact with members may be delivered via *telehealth* as clinically appropriate by practice acts, state and federal policy.
 - Physical, Occupational and Speech Therapy can be provided via telehealth (exception: Swallowing Evaluation by ST)
- **Skilled Nursing Services Hourly – LPN (ICWP, NOW, COMP only):**
 - Rate increase

NOW and COMP Maximum Unit Caps- continued

Appendix K Approval

Temporarily **exceed service limitations** or requirements for amount, duration, and prior authorization to address health and welfare issues presented by the emergency.

- Community Living Support
- Community Access Services
- In-home and Out-of-home Respite
- Specialized Medical Supplies

*Note- documentation of the need **is required to be** tied to the Public Health Emergency

At a Glance: Expanded Service Settings- continued

Temporarily expand setting(s) where services may be provided (K-2.b.iv):

What this means for you:

- Services can be now rendered in new settings:
 - Hotels
 - Shelters
 - Schools
 - Churches
 - Other approved temporary living situations

Applicable Services:

- Community Residential
- Additional Staffing
- Community Access Services
- Respite

FAQ:

Why not Community Living Support?

Existing policy does not prohibit delivery in other settings where the member may live temporarily, e.g. other family homes, hotels

How would I submit claims?

Just as you would ordinarily

Document the location and reason

Temporary Family Caregivers-continued

Temporarily permit payment for services rendered by family caregivers or legally responsible individuals if not already permitted under the waiver [K-2.c]:

What this means for you:

- Family caregivers or legally responsible individuals can be reimbursed for delivering
 - CLS
 - Out of Home Respite
- Family Caregivers or legally responsible individuals will need to be employed by traditional providers or enrolled through the fiscal intermediary agency and Participant-direction process

FAQs:

How do we bill for use of family caregivers?

- *Submit claims as indicated in the ISP and approved PA*
- *Document service delivery method*

Will the family caregiver continue to be employed after the emergency?

No. DBHDD requested this allowance to accommodate concerns about waiver member risk and isolation recommendations

- Community Living Support Services
- Out of Home Respite
- In-home Respite
- Community Access

Modify Provider Qualifications- continued

Temporarily modify provider qualifications [k-2.d.i]:

Remove or modify training requirements for direct service staff:

- Newly-hired inexperienced staff will be required to participate in electronic person-centered training
- Family members or others with experience in activities of daily living (ADL) care will be supported as needed by agency supervisory staff

What this means for you:

- Certain training requirements may be completed through electronic or telephonic means
- Agency supervisory staff will manage, supervise and train staff using social distancing guidelines

FAQs:

How do I document training:

- *Document the skill level of the newly hired employee in the personnel file*
- *Document electronic/telephonic training in specific areas indicated through evaluation of staff skill matched to member need*

Modify Support Coordination Activities-continued

Temporarily modify processes for level of care evaluations or re-evaluations [K-2.e]

- Assessments and reassessments can be performed via video conference or telephone
- Many support coordinators have begun to resume face-to-face contact with exposure precautions

Temporarily modify person-centered service plan development process and individual(s) responsible for person-centered service plan development, including qualifications [K-2.g]

- Individual Service plan meetings can be performed via video conference or telephone
- Refer to Appendix K Operational guidelines for more specifics at:

<https://gadbhdd.policystat.com/policy/8618606/latest/>

What this means for you:

- Level of care evaluations or re-evaluations may be conducted via telehealth
- Support Coordinators will use telephonic or video conferencing for ISP development and editing, instead of face-to-face as needed

FAQs:

What about individual signature?

- Assessor/support coordinator documents member's consent for use of **electronic signature method** and collects a physical signature as soon as safely possible

Increased Payment Rates- continued

Support
Coordination

Fiscal
Intermediary

LPN- hourly
nursing services
only

Increased Payment Rates- NEW*

- 10% Rate Increase for:
 - CLS
 - CAG
 - CAI
 - CRA
- Increase is retroactive to March 1, 2021

Billing for Services with Temporary Rate Increases

Services with Temporary Rate Increases

Billing Guidance – For claims with service dates from March 1, 2021, please adjust your claims to receive the temporary rate increase. Voiding previously paid claims with the current rate and creating a new claims for the temporary rate is also an option.


Prior Authorization Rate Adjustment Example

Community Residential Alternative – Category 1, 3 Person Residence
Medicaid Published Rate: \$178.53 / Appendix K Temporary Rate: \$196.38

Prior Authorization effective 11/1/2020 to 10/31/2021.

Line Items					
PA Line Item	03	Status	APPROVED	Rendering Provider	CASE MANAGEMENT, INC
		COS Code	681	Category of Service	CHSS/COMP
From DOS	11/01/2020			Tooth	
Through DOS	10/31/2021			Quadrant	
Most Recent DOS Paid	04/05/2021			Surface	
Units Allowed	344	Amount Allowed	\$67,555.75		
Units Used	151	Amount Used	\$26,958.03		
Max Monthly Units	0	Max Monthly Amount	\$0.00		
Max Daily Units	0	Authorized Rate	\$196.38		

RATE INCREASE



Although the Prior Authorization effective date in the image above is 11/1/2020, the temporary rate increase should only be billed beginning March 1, 2021. Dates of service prior to this date must remain at \$178.54 per unit, the rate prior to the Appendix K rate increase.

Claims Submission for Rate Adjustment Example

Community Residential Alternative – Category 1, 3 Person Residence
Medicaid Published Rate: \$178.53 / Appendix K Temporary Rate: \$196.38

Pre-Appendix K Approval	
Month	March 2021
Authorized Rate	\$178.53
Units Used	31
Amount Used	\$5,534.43

Appendix K Approval, Effective 3/1/2021	
Month	March 2021
Authorized Rate	\$196.38
Units Used	31
Amount Used	\$6,087.78

Billing Reminder - Medicaid Claims Timely Filing Rules

Timely Filing Rules

6 Months

For most providers, timely filing is six months from the month of service (MOS) – the month the service was rendered by the provider. However, there are variations which you should be aware:

3 Months

- Claim adjustment – Within three months of the month of payment
- Claim resubmission – Within three months of the month the denial occurred
- Crossover claim – Within 12 months of MOS
- Secondary/TPL claim – Within 12 months of MOS

12 Months

- One year (365 days) Claims Submission Edit (NEW)

Additional Billing Guidance: Claims Adjustment Process

11.5.2 Adjusting a Professional Claim

Step	Action	Result
	Start from the secured Claims menu.	
1	Select the Search (Void, Adjust) submenu.	The Claim Search panel displays.
2	Enter the appropriate search criteria.	
3	Click search .	The Search Results panel displays.
4	Select the professional ICN to be adjusted.	The professional claim is displayed in detail.
5	Click in the field(s) to update and perform update.	
6	Click adjust .	A confirmation pop-up window appears.

Additional Billing Guidance: Claims Adjustment Process

gainwell	Provider Web Portal Navigational Manual	
Step	Action	Result
7	Click OK to confirm the request.	The adjustment is submitted and the new daughter claim ICN and information is displayed. Note: If the adjustment is rejected, a new ICN beginning with "20" will appear with the appropriate denial reasons displayed on the EOB Information panel.

For all MMIS Web Portal billing processes, go to www.mmis.georgia.gov

Go to: **Provider Information**

Go to: **Provider Manuals**

Go to: **Web Portal Navigational Manual for Providers**

Provider Contact Center for Additional Billing Assistance

For additional billing assistance, please contact your Gainwell Provider Representative using the contact numbers below or by using the [Contact Us](#) form on the [GAMMIS Website \(www.mmis.georgia.gov\)](http://www.mmis.georgia.gov)

Contact Us

Providers with web navigation or Georgia Medicaid questions may contact the Provider Contact Center using one of the methods below:

- Fill out the [Contact Us](#) form
- Call the local number (770) 325-9600
- Call the toll-free number (800) 766-4456

Level of Care-*New

- DBHDD is required to complete the FY2021 and FY2022 DMA-6 & DMA-7s for all individuals in waiver services
- In partnership with Support Coordination, this task is under way
- Signed DMA 7s will be uploaded in the individual's record in IDD Connects as completed.
 - Note: DMA-7s do not require the individual's signature

COVID-19 Resources

For general information about COVID-19:

<https://dph.georgia.gov/covid>

For information about COVID-19 vaccination:

<https://dph.georgia.gov/locations/covid-vaccination-site>

Please continue to monitor Provider Messages for updated information on Appendix K activities: <https://www.mmis.georgia.gov/portal>

Links to Important Orders & Guidance

Governor Office Executive Orders:

<https://gov.georgia.gov/executive-action/executive-orders/2021-executive-orders>

Department of Public Health Administrative Order:

<https://dph.georgia.gov/administrative-orders>

-Long-term Care facility Administrative Order

CDC Covid-19 Guidance

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Questions & Answers

PowerPoint slides and recording from today's presentation will be uploaded onto DBHDD website with the other COVID related material