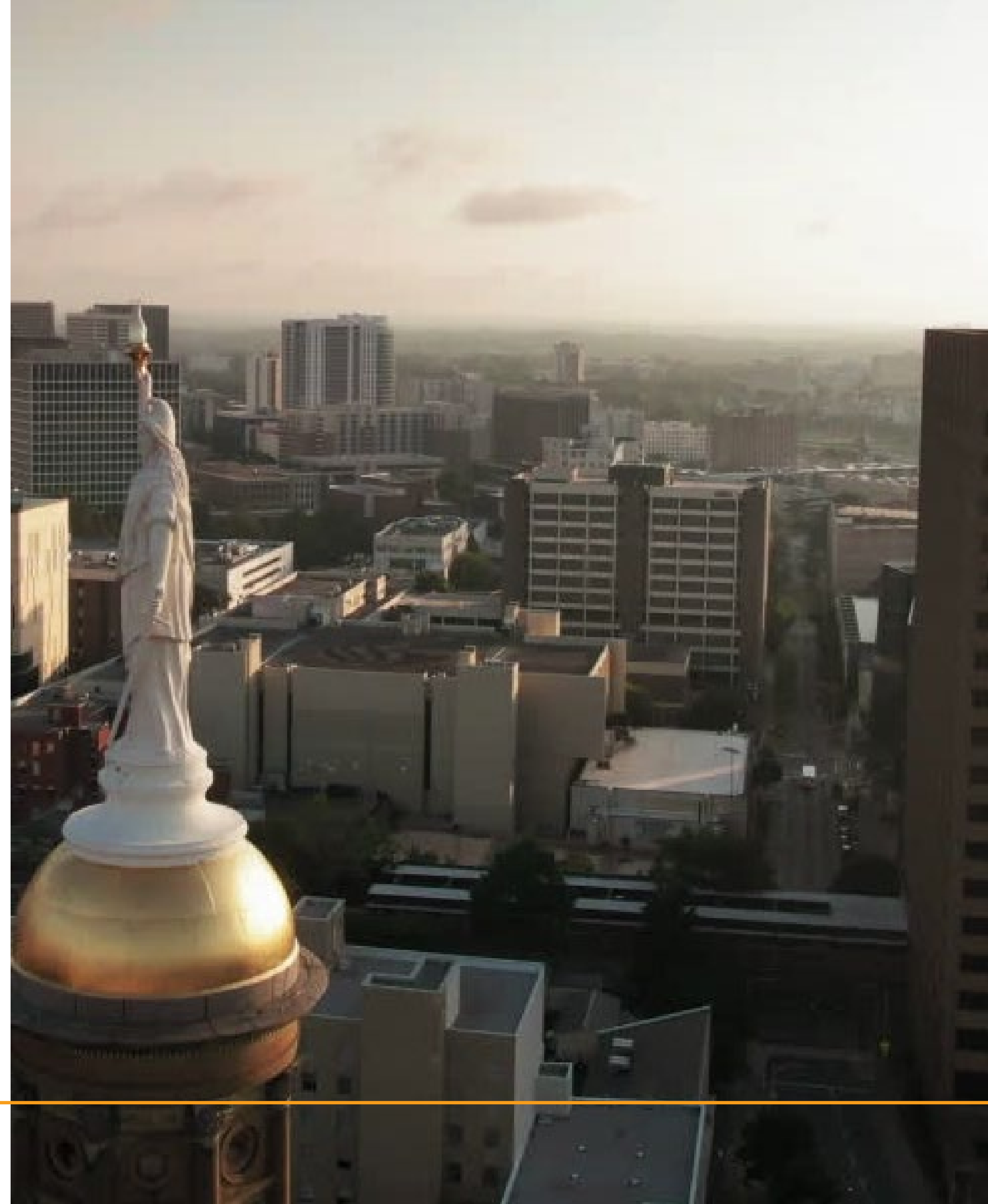




D·B·H·D·D

IDD Provider Meeting

September 8th, 9th & 10th, 2026



Agenda



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

Meeting:	DBHDD IDD Provider Meetings		
Dates/Locations:	September 8, 2026 -UGA Tifton Campus Conf Center - 15 R D C Rd, Tifton, GA 31794		
	September 9, 2026 -Middle GA State University, Robert F. Hatcher Conference Center, Banquet Hall-100 University Pkwy Macon, GA 31206		
	September 10, 2026 -Douglasville Conference Center, 6700 Church St, Douglasville, GA 30134		
Topic	Time	Presenter	
Opening Welcome	9:00 am – 9:20 am	Ron Wakefield, IDD Division Director, DBHDD	
Community Access Group Update	9:20 am – 9:50 am	Ron Singleton, DD Division Budget Manager, DBHDD	
Engage Now Update & NDEAM	9:50 am – 10:05 am	Christine Gudgin, Community Life Engagement Manager, DBHDD	
CLA Licensure	10:05 am – 10:20 am	Brittany Roberts, Assistant Director, Office of Incident Management and Compliance & Veronica Jackson, CLA Licensure Manager, DBHDD	
GA Uplift	10:20 am– 10:30 am	Michelle Maxwell-Tifton Katrina Cohens-Macon Terriana Briggs-Douglasville	
Therap	10:30 am -11:30 am	Heather Daily & Dr. Ishya Dotson-Tifton Heather Daily and Tarin Tripp-Macon Tarin Tripp and Jason Laws-Douglasville	
QEPR Review, Billing Validation Component	11:30 am – 12:00 pm	Paula Dooley, Qlarant	
All Audience Provider Q/A	12:00 pm – 12:30 pm	All DBHDD staff – responding to written questions from audience	



Ron Wakefield, IDD Division Director DBHDD



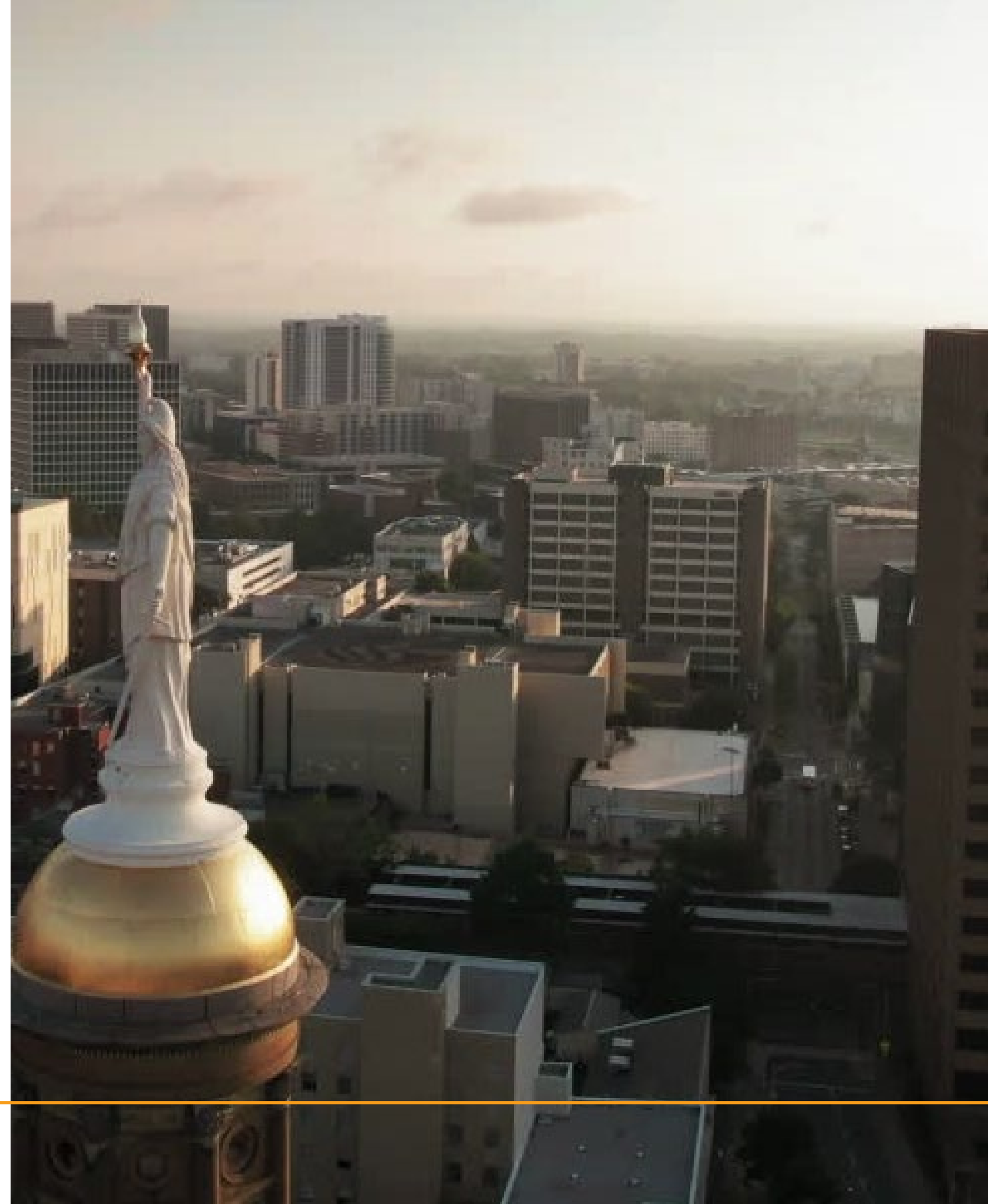
D·B·H·D·D

Community Access Group

Community Based Services Implementation &
Billing Review

Ron Singleton

DD Senior Program Manager



Key Tips to Remember

#1

Community Based rates are determined by Rate Categories.

Rate Categories are based on individual Support/Assessment Levels.

#2

Waiver recipients receiving Community Residential Alternative and Respite Services currently have a Rate Category in place.

#3

A Support Level report is in the Therap Report Library.

The report name: DBHDD-GA :: Individual Support Level Details Report

Key Tips to Remember

#4

The Facility Based Service rate is \$3.65 per 15-minute unit, for all Categories.

The historical daily limit of 6 hours (24 units) no longer apply.

#5

The annual unit limit was increased to 6,000 units per year. This does include Pre Vocational Services. It does not include Community Access Individual Services. See Policy 02-444 regarding the service changes.

#6

ISPs must be Person Centered. For additional units for CAG (or any waiver service), justification based on the individual's needs and wants must be documented.

Justify! Justify! Justify!

Support Level Details Report (A)

Sections

☰ To Do

👤 Individual

📊 Reporting

⚙️ Admin

⚙️ Settings

Agency Wide Reports

Last Login Information

View

Report Library

View

Assign Users To Report

Assign Reports To User

Staff Report

View

Support Level Details Report (B)

List of Reports

Search Reports

Report Name:

Report Description:

Support

Input Tags:

Search

Show All

One item found.

1

Report Name

DBHDD-GA :: Individual Support Level Details Report

This will be a custom report for all DBHDD-GA linked providers in production. This report provides a detailed breakdown of Support Level assessment scores and tracking information for individuals recorded in the DBHDD-GA IDF. It details individual demographic information, oversight and IDF form identifiers, active form statuses, assessment dates, and specific Support Level scores.

<< Back

Support Level Details Report (C)

Report :: DBHDD-GA :: Individual Support Level Details Report

Oversight ID	IDF Form ID	First Name	Last Name	DoB	IDF Status	Individual ID	Assessment Date	Assessment Score (Support Level)
--------------	-------------	------------	-----------	-----	------------	---------------	-----------------	----------------------------------

<< Back

Cancel

Rate Categories

Level	CAG Rate Category	Group Home Rate Category	Host Home Rate Category	Respite Rate Category
1	Category 1	Category 1	Category 1	Category 1
2	Category 2	Category 2		
3	Category 3	Category 3		
4				
5	Category 4	Category 4	Category 2	Category 2
6				
7				

Current Criteria for Levels and Rate Categories

***Based on Supports Intensity Scale 2nd Edition**

CAG- Community Rate Category	Level	Supports Intensity Scale		
		Support Needs Index	Section 1A (Medical)	Section 1B (Behavioral)
Category 1	1	86 or Less	Less Than 5	Less Than 5
Category 2	2	87 to 102	Less Than 5	Less Than 5
Category 3	3	102 or Less	5 to 6 in Either Section or Verified Supplemental Questions (SQ)	
	4	103 to 115	Less Than 7	Less Than 7
Category 4	5	116 or Greater	Less Than 7	Less Than 7
	6	Any	7 or Greater or Verified SQs	Less Than 7
	7	Any	Any	7 or Greater or Verified SQs

Previous Criteria for Levels and Rate Categories

***Based on Supports Intensity Scale 1st Edition & HRST**

Level	Supports Intensity Scale		Health Risk Screening Tool
	Sum of Sections 2A, 2B, and 2E	Section 1B (Behavioral)	
1	0 to 24	Less Than 7	Low Risk (HCL 1-2)
2	25 to 30	Less Than 7	Low Risk (HCL 1-2)
3.1	0 to 30	7 to 10	Low Risk (HCL 1-2)
3.2	0 to 30	Less Than 11	Moderate Risk (HCL 3-4)
4	31 to 36	Less Than 11	Low or Moderate Risk (HCL 1-4)
5	37 to 52	Less Than 11	Low or Moderate Risk (HCL 1-4)
6	Any	Less Than 11	High Risk (HCL 5-6)
7	Any	11 to 26	Any

Supports Intensity Scale – 2nd Edition Implementation

AAIDD SIS-A 2nd Edition Webinar (June 16, 2025)

Implementation Plan

- Starting in July 2025, as a participant requires a new SIS-A assessment according to the reassessment schedule, they will receive the 2nd Edition.
- The updated support needs level framework will be applied to the new SIS-A 2nd Edition.
- Until a participant receives a new SIS-A, they will continue to use the current model that includes scores from the SIS-A and the HCL score they had as of July 1, 2025.
 - Going forward, the results of HRST updates will no longer impact the participant's support level.

Supports Intensity Scale – 2nd Edition Support Level

Coming Soon in Therap!

Filter

Assessment Type	Assessment Score	Band/Percentile	Assessment Date
Support Level	5.00		10/08/2025

Showing 1 to 1 of 1 entry (filtered from 3 total entries)

Community Access-Group Payment Rates

Setting	Rate Category	Current Rate per 15 Min.	Proposed Rate per 15 Min.	Final Rate per 15 Min.	Final Code
Facility	1	\$3.65	\$2.20	\$3.65	T2025-HQ
Facility	2	\$3.65	\$2.66	\$3.65	T2025-HQ
Facility	3	\$3.65	\$3.61	\$3.65	T2025-HQ
Facility	4	\$3.65	\$4.55	\$3.65	T2025-HQ
Community	1	\$3.65	\$3.13	\$3.65	T2025-HQ-U1
Community	2	\$3.65	\$3.73	\$4.18	T2025-HQ-U2
Community	3	\$3.65	\$4.68	\$5.23	T2025-HQ-U3
Community	4	\$3.65	\$6.66	\$7.42	T2025-HQ-U4

***Community Based Services include additional billing modifier (U7).**

Manual Updates by DBHDD Field Offices



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Disabilities

All Individual Service Plans (ISPs) and applicable Prior Authorizations, dating back to **September 1, 2025**, will be updated, upon the request of the CAG providers. This will include updates for both case management systems; IDD Connects and Therap.

DBHDD will not mandate that all PAs be updated. We will honor a provider's request to opt out of retroactive updates.



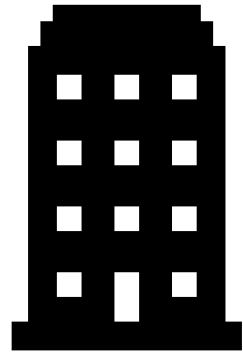
IDDConnects



Therap®

Annual Units (Hours) Distribution: Facility & Community

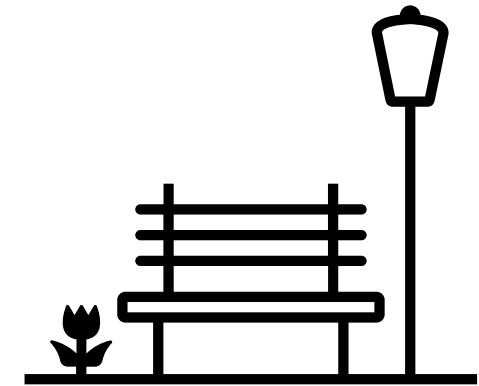
Facility



Annual Units

5,760

Community



80% of Annual Units

4,608

**Provider Assistance
Needed**

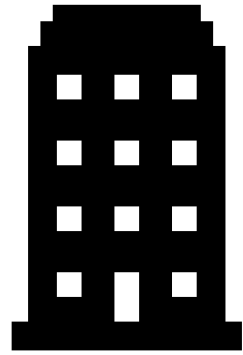


20% of Annual Units

1,152

Annual Units (Hours) Distribution: Facility & Community

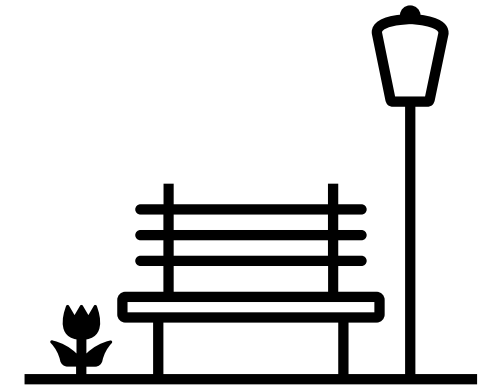
Facility



Annual Units

5,760

Community



50% of Annual Units

2,880

**Provider Assistance
Needed**

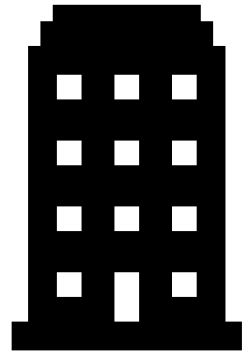


50% of Annual Units

2,880

Annual Units (Hours) Distribution: Facility & Community

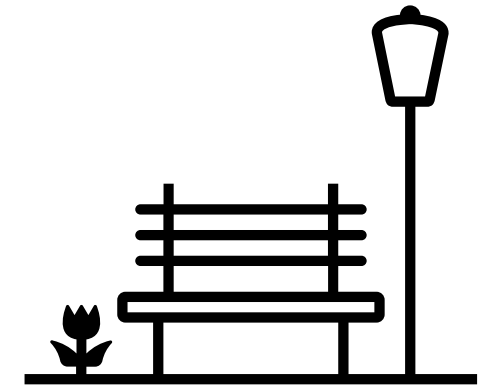
Facility



Annual Units

5,760

Community



0% of Annual Units

0

**Provider Assistance
Needed**



100% of Annual Units

5,760

Annual Units (Hours) Distribution: Facility & Community Examples

***Based on 6 hours per day, 5 days per week**

SETTING							
FACILITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	5	20	5	25	100	400	83%
COMMUNITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	1	4	5	5	20	80	17%

SETTING							
FACILITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	3	12	5	15	60	240	50%
COMMUNITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	3	12	5	15	60	240	50%

SETTING							
FACILITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	0	0	5	0	0	0	0%
COMMUNITY	HOURS PER DAY	UNITS PER DAY	DAYS PER WEEK	HOURS PER WEEK	UNITS PER WEEK	MONTHLY UNITS	PERCENTAGE
	6	24	5	30	120	480	100%

Previous and Current ISPs/PAs



Georgia
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Behavioral Health
& Developmental
Disabilities

Please provide, in writing, a request to the DBHDD field office if you desire to have an existing or previous Prior Authorization updated to including a billable service line for Community Access-Community Based services.

Please include the following items below in your request.

**Individual's
Last Name**

**Individual's
County of
Residence**

**Individual's
CID Number**

**CAG
Distribution
Percentage**

Field Office Operations Analysts Review the Following:

- Verify Category/Tier (IDD Connects/Therap/Manual Calculation)
- Claims Review in GAMMIS
- Calculation of Prior Authorization Claims Adjustment
- Update the ISP in IDD Connects (Service Summary & Prior Authorization)
- Update the ISP and Pre Auth in Therap

Upcoming ISP Renewals



Georgia
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Behavioral Health
& Developmental
Disabilities

During the initial NOW or COMP ISP meeting or the annual ISP renewal meeting, please provide the Planning List Administrator/Support Coordinator/Intensive Support Coordinator/State Support Coordinator with a distribution percentage for CAG Services. The DBHDD Field Office will apply this percentage to each service line.

**CAG
Distribution
Percentage**

***Note: This is a temporary process.**

IDD Connects ISP (Service Summary)



The current and/or previous ISP will be manually updated to include an additional service line for Community Based CAG.

Service Summary

Refresh

Status

Assessment Level

Modified Date

Date Completed

In-Progress

5

10/15/2024

07/15/2025

		Service Description	PA Approved	Detailed Service Description	
1	☐	Community Access		Community Access - Group	
2	☐	Community Access		CAG – Community – Category 4	

10

Remove Service

Add New Service

Minimum FTF Visit Frequency

Monthly

IDD Connects Prior Authorization



Georgia
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Behavioral Health
& Developmental
Disabilities

The Prior Authorization (PA) will contain the billable Procedure Code(s).
***Rates aren't visible within IDD Connects.**

Detailed Service Description ⌵	Procedure Code	Units ⌵	Start Date	End Date
Community Access - Group	T2025-HQ	2080	09/01/2025	08/31/2026
CAG - Community - Category 4	T2025-HQ-U4-U7	2080	09/01/2025	08/31/2026

GAMMIS Web Portal Prior Authorization



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

The Prior Authorization (PA) in the GAMMIS Web Portal will contain the billable Procedure Code(s) and Modifiers.

***All Procedure Codes and/or Modifiers must be included for claims submission.**

Procedures							
PA	Line Item	(Procedure Description)	(Modifier 1 Description)	(Modifier 2 Description)	(Modifier 3 Description)	(Modifier 4 Description)	NDC
	01	T2025 WAIVER SERVICE, NOS	HQ M/CAID CARE LEV 4 STATE DEF	U4 M/CAID CARE LEV 4 STATE DEF	U7 M/CAID CARE LEV 4 STATE DEF		

GAMMIS Web Portal Claims Submission



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

***All Procedure Codes and/or Modifiers must be included for claims submission.**

Procedures							
PA							
Line Item	(Procedure	Description)	(Modifier 1 Description)	(Modifier 2 Description)	(Modifier 3 Description)	(Modifier 4 Description)	NDC
01	T2025	WAIVER SERVICE, NOS	HQ M/CAID CARE LEV 4 STATE DEF	U4 M/CAID CARE LEV 4 STATE DEF	U7 M/CAID CARE LEV 4 STATE DEF		

Procedure*

T2025

Procedure Description

Modifier 1

HQ

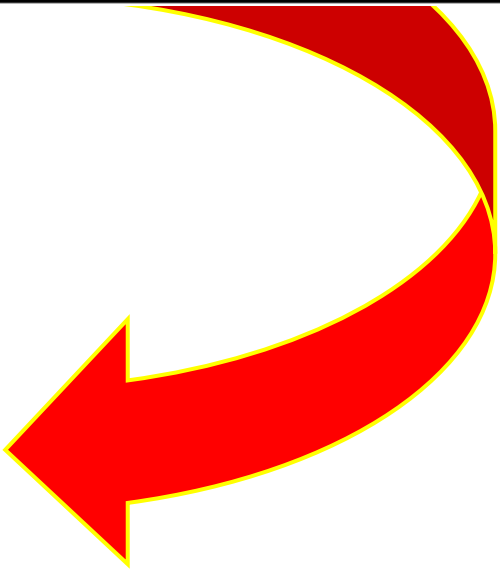
Modifier 2

U4

Modifier 3

U7

Modifier 4



CAG Community Based Common Claim Denial



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

EOB Code: 3043

***Verify with Provider Remittance Advice (RA)**

GEORGIA DEPARTMENT OF COMMUNITY HEALTH
MEDICAID MANAGEMENT INFORMATION SYSTEM
PROVIDER REMITTANCE ADVICE
EOB CODE DESCRIPTIONS

EOB List									
Dtl#	Origin	EOB	Adj Amt	Adj Units	EOB Description	Benefit Plan	Financial Payer	Rpt	HIPAA Reasons
1	S	3043	262.80	0	PRIOR AUTHORIZATION/PROCEDURE CODE MODIFIER CONFLICT			Yes	Claim/service lacks information or has submission/t



Gainwell – Claims Deep Dive Presentation

Submission vs. Resubmission

<u>SUBMISSION OF CLAIMS</u>	<u>ADJUSTMENT/ RESUBMISSION of CLAIMS</u>
• Primary: Six (6) months from the month of service. • Secondary: Twelve (12) months from the month of service.	• Paid claims: Three (3) months or 90 days from the adjudication date • Denied claims: Three (3) months or 90 days from the adjudication date • Retro-Eligibility: Six (6) months from retro “Add” date on the member’s file.



Gainwell Technologies Proprietary and Confidential



20

Gainwell – Claims Deep Dive Presentation

Contact My Provider Rep Directly

- **Login to the MMIS Web Portal** with your username and password.
- **Select the Web Portal Option.**
- **Select Contact Information** and then **Contact Us** from the drop-down menu.
- **Select a Type of Inquiry item → Enter Details → Select a Contact Method and Enter details → Submit.**

**SUBMIT AN
INQUIRY**

GAMMIS: Contacting DCH (Gainwell Support)



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

Department of Community Health (DCH)

<https://dch.georgia.gov/about-us/contact-us>

The logo for the Georgia Department of Community Health features a stylized white star on a dark blue background, with the text 'D·B·H·D·D' in white text below it.

GEORGIA DEPARTMENT of
COMMUNITY HEALTH

An official website of the State of Georgia. How you know ▾

MENU

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About Us

Office of the Commissioner

The Board of Community Health ▾

Legal ▾

Media Relations ▾

Annual Reports ▾

Contact Us

Contact Us

CONTACT

DCH Main Office

[Send us an Email](#)

[Constituent Services Frequently Asked Questions \(FAQs\)](#)

Primary: [\(404\) 656-4507](#)

Visit: [\(details\)](#)
2 Martin Luther King Jr.
Drive SE
East Tower
Atlanta, GA 30334

Therap Pre Auth (Prior Authorization)



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

The current and/or previous ISP and Pre Auth will be manually updated to include an additional service line for Community Based CAG.

Pre Auth(s)

Form ID	Program	Service	Service Provider	Service From Date	Service To Date	Service Amount	Unit of Measure	Frequency	Total Units	Rate Amount(\$)	Total Amount(\$)	Status
EXAMPLE-DBHDDGA-THERAP SERVICE LINE	COMP - Comprehensive Support Waiver Program	CAG - Community Access - Group - Facility	GA012XXX - THE DAY PROGRAM, INC. (MEDICAID NUMBER: 000111222A) (123 GROUP HOME ST, ATLANTA, GA 30000-1234)	07/01/2026	06/30/2027	20	Hour	Weekly	4160	\$3.65	\$15,184.00	Approved
EXAMPLE-DBHDDGA-THERAP SERVICE LINE	COMP - Comprehensive Support Waiver Program	CC1 - CAG - Community - Category 4	GA012XXX - THE DAY PROGRAM, INC. (MEDICAID NUMBER: 000111222A) (123 GROUP HOME ST, ATLANTA, GA 30000-1234)	07/01/2026	06/30/2027	5	Hour	Weekly	1040	\$7.42	\$7,716.80	Approved

Therap Pre Auth Sub Service(s)



Pre Auth Sub Services contain the Service Code and Service Rate.

Sub Service(s)

Service Code	Service Name	Service Rate
T2025-HQ	Community Access - Group - Facility	\$3.65

Sub Service(s)

Service Code	Service Name	Service Rate
T2025-HQ-U4-U7	CAG - Community- Category 4	\$7.42

Therap Pre Auth: Coming Soon!



Community Access Group will be authorized as a single service. DBHDD will use the ‘**Total Units**’ and Community Based ‘**Rate Amount(\$)**’ to determine the ‘Total Amount(\$)’.

Pre Auth(s)												
Form ID	Program	Service	Service Provider	Service From Date	Service To Date	Service Amount	Unit of Measure	Frequency	Total Units	Rate Amount(\$)	Total Amount(\$)	Status
EXAMPLE-DBHDDGA-THERAP SERVICE LINE	COMP - Comprehensive Support Waiver Program	CF4 - Community Access - Group - Category 4	GA012XXX - THE DAY PROGRAM, INC. (MEDICAID NUMBER: 000111222A) (123 GROUP HOME ST, ATLANTA, GA 30000-1234)	07/01/2026	06/30/2027	30	Hour	Weekly	6000	\$7.42	\$44,520.00	Approved

Therap Pre Auth Sub Service(s): Coming Soon!



Georgia
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Behavioral Health
& Developmental
Disabilities

Community Access Group will be authorized as a single service but will allow for the billing of both applicable Service Codes.

Sub Service(s)

Service Code	Service Name	Service Rate
T2025-HQ-U4-U6	CAG-Facility-Category 4	\$3.65
T2025-HQ-U4-U7	CAG-Community-Category 4	\$7.42



Georgia
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& Developmental
Disabilities

Due to the volume of Prior
Authorizations currently in place,
please be patient throughout this
process.



D·B·H·D·D

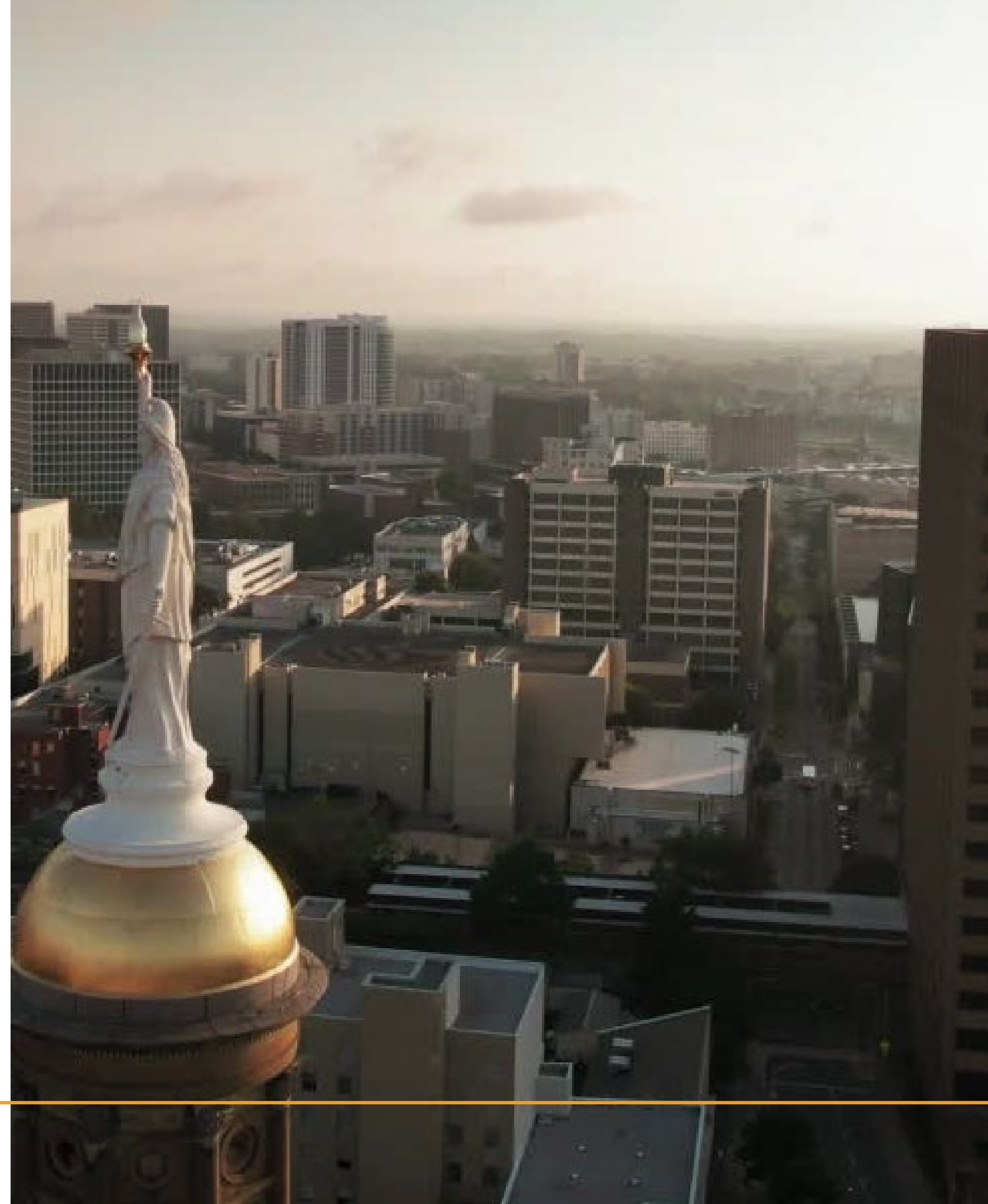
Engage Now Georgia!
NDEAM

Christine Gudgin

Community Life Engagement Manager

Christine.Gudgin@dbhdd.ga.gov

Georgia Department of Behavioral
Health and Developmental Disabilities





**UNIVERSITY OF
GEORGIA**
David Ralston Institute for Behavioral
Health and Developmental Disabilities
Center on Human Development and Disability



**Institute for
Community
Inclusion**



NASD DDS
National Association of State Directors
of
Developmental Disabilities Services

Project Overview

- Chanan Foundation
- Hope Haven of Northeast GA
- Claratel BH
- Frazer Center
- EmployAbility
- Wesley Glen Ministries

Provider Intensive
TA

DBHDD Regional Team
Capacity Building

Regional
Engagement

Provider Webinar
Series

Series scheduled to
begin
October 13, 2026

Self-Advocate and
Family Engagement



The Ralston Institute for Behavioral Health and Developmental Disabilities

Advancing solutions at the intersection of research, practice, and policy

- Established in 2024
- Named in honor of David Ralston, a statewide champion for mental health reform
- Housed at the University of Georgia within the College of Family and Consumer Sciences

Focus:

- Workforce development
- Recovery, inclusion, and community support
- Youth and adolescent well-being
- Access and equity

Approach:

- Translating evidence into action to improve systems, services, and outcomes statewide



Institute for Community Inclusion (ICI): Boston UMass

<https://www.communityinclusion.org/>

- University Center for Excellence in developmental disabilities (UCEDD)
- Research & training
- National employment outcome data tracking
- Provider capacity building and technical assistance
- Focus areas:
 - Employment
 - Community life
 - Education
 - Health care
- Home offices in Boston
- Primarily remote workforce located across 20+ states

National Association of State Directors of Developmental Disabilities Services (NASDDDS)

<https://www.nasddds.org/>

- Supports and represents members from the nation's states, territories, and the District of Columbia providing services to children and adults with IDD.
- NASDDDS promotes visionary leadership, systems innovation, and the development of national policies that support home and community-based services.
- Project focus areas:
 - Employment
 - Supporting Families
 - National Core Indicators Data
 - State of the Workforce Data
 - Supporting People with Complex Needs
 - Technology
- Technical assistance anything Medicaid
- Federal Policy and Hill presence



EnGAge Now!

Webinar Series

- October 13, 2026; 2-3pm: **Engage Now Georgia Webinar Series Kick-off**
- November 10, 2026; 2-3pm: **Setting a Vision and Raising Expectations for Employment and Community Life**
- December 8, 2026; 2-3: **Building an Organization that Supports Employment and Community Life**



Questions?

Please reach out to

Christine Gudgin

Christine.Gudgin@dbhdd.ga.gov



National Disability Employment Awareness Month

NDEAM



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

October is National Disability Employment Awareness Month

National Disability Employment Awareness Month celebrates and educates Americans about disability employment issues and the contributions of workers with disabilities.

This year's NDEAM will recognize the value and talent American workers with disabilities add to our workplaces and economy. That's the spirit behind this year's official theme: **"Celebrating Value and Talent."** NDEAM is led by the U.S. Department of Labor's Office of Disability Employment Policy, but its true spirit lies in the grassroots experience across the nation. Employers of all sizes and in all industries are encouraged to participate in NDEAM.

Where and When...



Georgia
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Behavioral Health
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Disabilities



**Celebrating
Value and
Talent**

**October 27, 2026
9:00AM - 1:00PM
Open to all**

**Tubman Museum
310 Cherry Street
Macon, GA 31201**



Center on Human
Development and Disability
World Health Institute for Developmental
Disabilities and Developmental Disabilities
UNIVERSITY OF GEORGIA



Advancing Employment



Call for Nominations



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

We are accepting nominations for Employer, Employee/Entrepreneur, System Navigator and Advocate of the Year, along with the Supported Employment Legacy Award.

The deadline for nominations is **Oct. 2, 2026**. Please email the DBHDD Supported Employment Inbox at SupportedEmployment@dbhdd.ga.gov for more information and nomination forms!



D·B·H·D·D

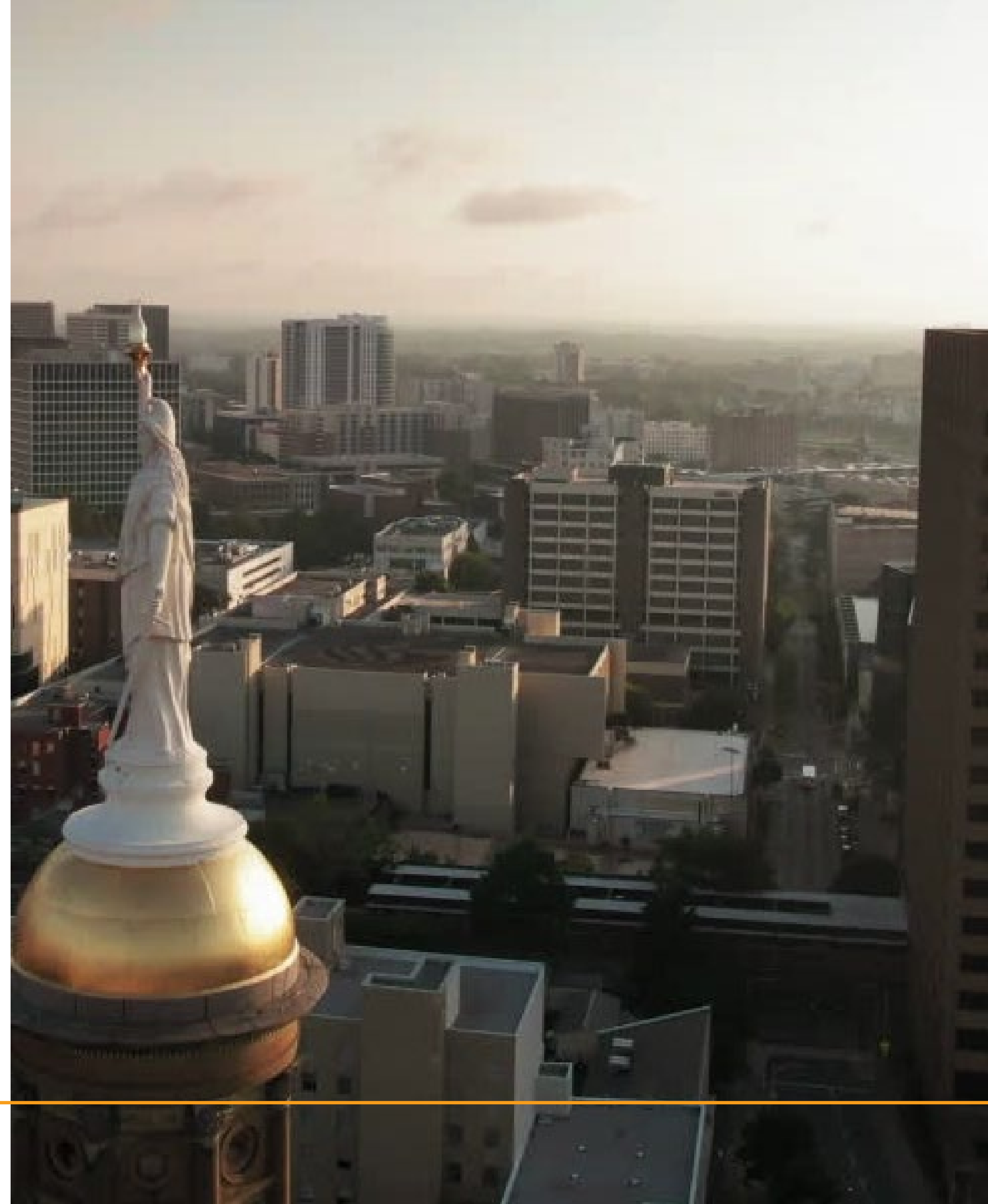
CLA LICENSURE

Brittany Roberts

Assistant Director, Certification and Licensure Unit

Veronica Jackson , BSN, RN, MBA, CALA, SMQT

CLA Licensure Manager, Certification and Licensure Unit





Effective January 1, 2026:

**GA House Bill 584 transferred
Community Living
Arrangement (CLA) licensure
responsibility and oversight to
DBHDD**

The background of the slide is a photograph of the Georgia State Capitol building, focusing on its large, ornate dome and the statue of Liberty on top. The image is slightly faded to allow the text to be prominent.

What has not changed?

1

Licenses issued by DCH prior to January 1, 2026, are still valid.

2

Incident reporting (IMAGE) and background check processes (CheckPT).

3

Licensure applications are still submitted through the GAHLES portal:

<https://gahles.dch.georgia.gov/>

Types of Licensure Applications and Surveys

Applications

Initial (opening a new CLA)

Decrease in Bed Capacity

Increase in Bed Capacity

Change of Ownership (CHOW)

Governing Body Name Change

Facility Name Change

Address Change (not relocation)

Surveys

Initial

CHOW

Routine

Survey Process

Submitted applications are evaluated by the Applications team and forwarded to the Certification and Licensure Unit (CLU)

A CLU surveyor notifies the provider of the upcoming site visit and includes the records request

Surveyor conducts the onsite visit and evaluates records

Final survey report with Corrective Action Plan request is sent to the provider

**DBHDD license is issued
(provisional or regular)**

Preparing for a survey



Georgia
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**Review the
Rules and
Regulations**

**Conduct internal
audits to ensure
compliance with
rules**

**Evaluate the
physical
environment of
the home**

**Ensure all
records are
complete and
organized**

**Upload the
specific records
requested
timely**

**Ensure the
environment
meets the
needs of the
residents**

**Evaluate your
current policies
and emergency
procedures**

**Ensure staff
trainings are
current**

Licensure No-nos and Reminders

Do not

- Accept individuals into a CLA that is not licensed.
- Accept individuals into a CLA over the licensed capacity.
- Expand into CLA services or open a new CLA if you have not been a DBHDD provider for 12 months

Reminders

- Providers cannot expand services or sites if they are granted a provisional license.
- An agency may not take over ownership of a CLA if they have not been a DBHDD provider for 12 months and are not DBHDD certified or accredited

Licensure Reality



Georgia
Department of
Behavioral Health
& Developmental
Disabilities

- Approximately **1,310** Community Living Arrangements across the state
- DBHDD is working through significant resource shortages for licensure work
- Extended wait and survey processing timelines due to resources shortages
- Site visits and surveys will be required for all CLAs with DCH issued licenses
- Currently we are focused on conducting surveys as applications are submitted
- Routine CLA visits will occur over time as the licensure team is built
- DBHDD licenses will be issued as surveys are completed

Resources

Licensure Information Webpage

<https://dbhdd.georgia.gov/beconnected/licensureinformation>

- Links to Rules and Regulations
- Application Packets and Forms
- Link to the GAHLES Portal
- Background Check Requirements
- Incident and Complaint Reporting
- Fee Payment Portal

Contacts

Licensure Applications

Licensure.Application@dbhdd.ga.gov

Licensure Surveys

Licensure_Survey@dbhdd.ga.gov

[Provider Inquiry Management System+](#)

INTRODUCING GEORGIA UPLIFT



Working Together Toward a More Stable DSP Workforce in Georgia

Empowering You Today = A Better Tomorrow



GEORGIA UPLIFT
helps you build on
the stability, support
and success you
want and deserve
for your life
and work.





SUCCESS COACHES



Katrina Cohens



Terriana Briggs



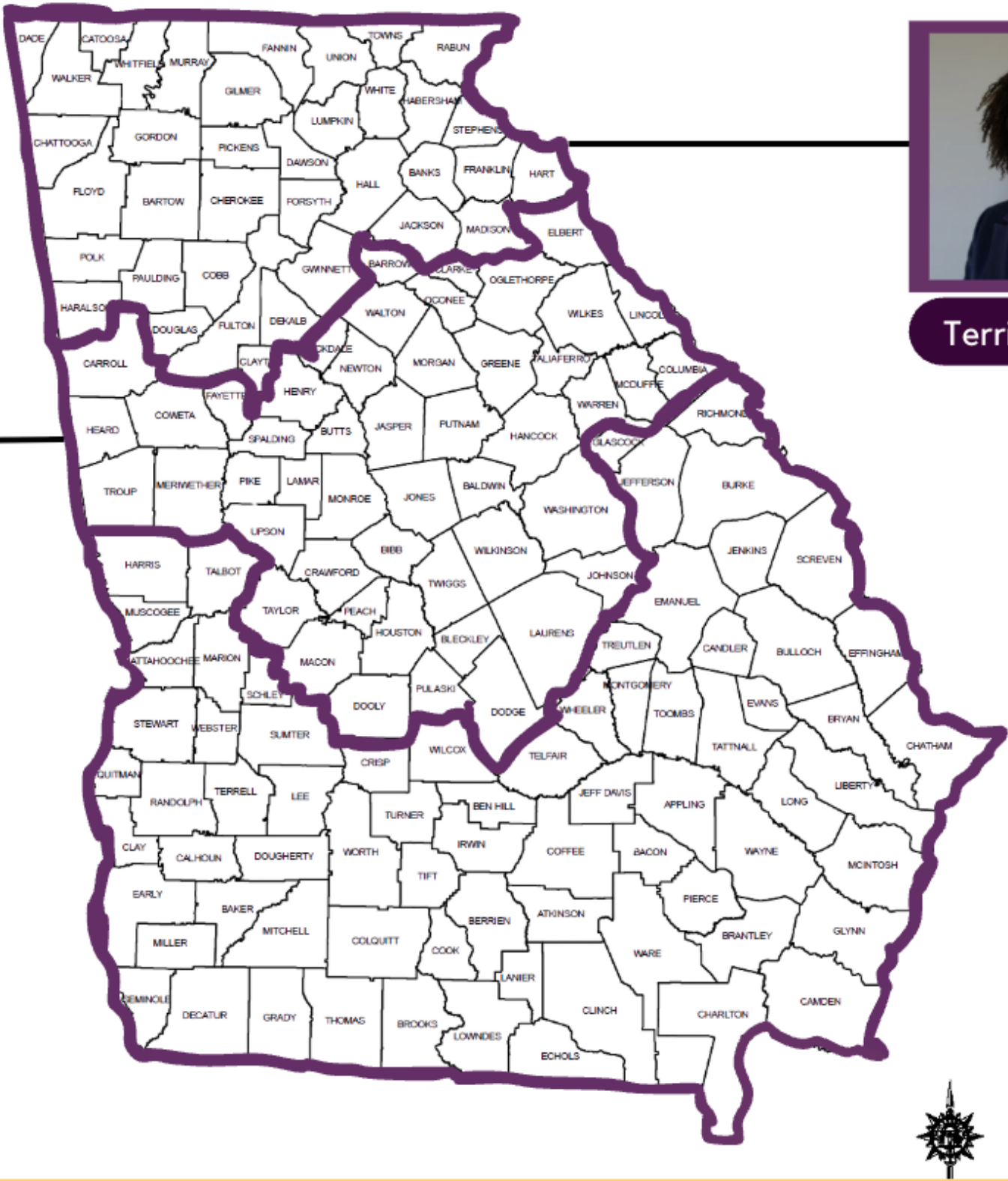
Michelle Maxwell

SUCCESS COACHES

GEORGIA UPLIFT INTRODUCTION



Katrina Cohens



Terriana Briggs



Michelle Maxwell

- ▶ Visit our website to see the full **LIST OF COUNTIES**
- ▶ Refer DSPs to a Success Coach using online referral form from the **START HERE** tab on our website
- ▶ Use the convenient **ORGANIZATIONAL REQUEST FORM** from the footer of our website to set up a presentation with a Success Coach

RESULTS & IMPACT



2025 RESULTS DSP JOB RETENTION

GEORGIA UPLIFT BENEFICIARIES
REMAINING IN THEIR POSITIONS

#248 %84.4

Georgia Uplift Lifetime Retention

#328 %88.10

The graphic above shows most recent quarter and **Lifetime Job Retention** for DSPs who have benefitted from Georgia Uplift services This compares with a **66.4%** retention rate in Georgia as determined by the **National Core Indicator's 2024 State of the Workforce Report.**



Morale has gone up.
DSPs feel like they are backed up and supported in areas they weren't supported in before.
Our services have improved because of that support.



Miranda Melton
Sunny Dale Service Center
Ocilla, GA

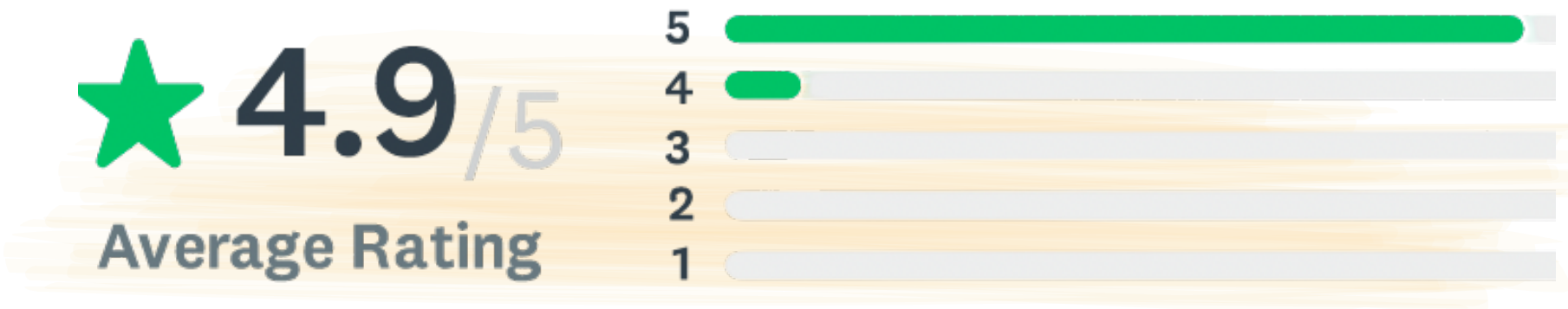
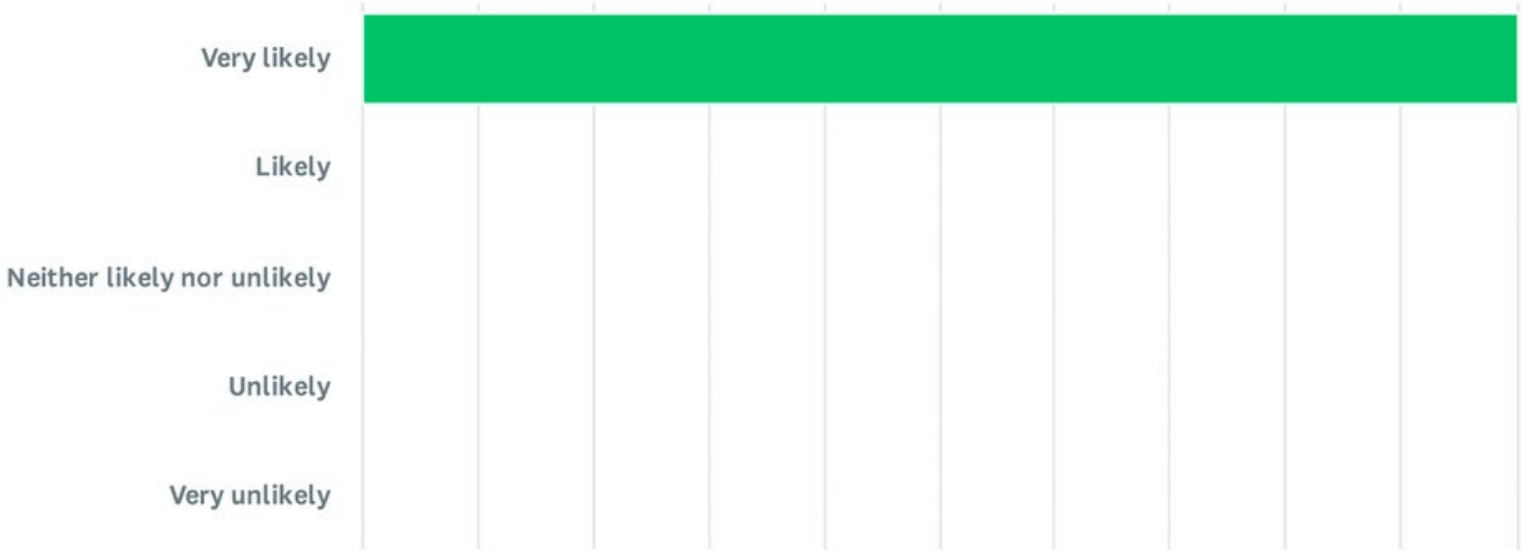


RESULTS & IMPACT

“My needs were met in a timely manner. Communication was clear, professional, and understanding, which was especially important given the circumstances of my situation. My Success Coach played a key role in helping to resolve my concerns. I would like to sincerely thank her and the Uplift team for the wonderful resources and support they provide. Without your assistance, my needs would not have been met.”

Georgia DSPs who have accessed services report high satisfaction levels with a **4.9 out of 5 rating** overall and ratings of Success Coach interactions well **over 90%**. One hundred percent (**100%**) of those receiving services stated they would refer another DSP to Georgia Uplift.

How likely is it that you would refer another Direct Support Professional





PROVIDER RESPONSIBILITIES

Meeting DSP Need and Boosting Retention

- ▶ Refer DSPs to a Success Coach using online referral form
START HERE tab on website
- ▶ Provide quarterly retention data for participating DSPs
E-mail your assigned Georgia Uplift Success Coach
- ▶ Share Georgia Uplift as a resource in your organization
Use **Organization Request Form** from footer of our website
to request brochures, magnets, posters, *DSP Guides to Thriving*
- ▶ Forward the **Georgia Uplift Newsletter** to others in your organization;
look for the intended audience at the top of each newsletter

Providers + Georgia Uplift

For Georgia IDD Providers

PARTNER WITH US

A Roadmap for Provider Organizations

Schedule a Presentation

- Contact your Georgia Uplift Success Coach to schedule a virtual or in-person presentation

INTRODUCING GEORGIA UPLIFT

Empowering You Today • A Better Tomorrow

Keep DSPs Informed

- Use splash screens
- Share *DSP Guides to Thriving*
- Forward e-mail newsletters and invite DSPs to subscribe to stay informed

YouTube

When direct support professionals connect with a Georgia Uplift Success Coach, they receive encouragement as well as practical tools and resources for thriving every day. Together, we create a better tomorrow by investing in these valuable employees today.

PROVIDER RESOURCES

- ▶ Visit the **PROVIDERS** tab on our website, georgiauplift.org
- ▶ Download complimentary **SPLASH SCREENS** and **BRAND KIT**
- ▶ Download your **PARTNER WELCOME KIT**

PROVIDER RESOURCES

GEORGIA UPLIFT INTRODUCTION

CONNECTING TO A SUCCESS COACH



1



2



3

DSP or Supervisor
makes referral from
START HERE tab
of Georgia Uplift
website

Georgia Uplift Success
Coach contacts DSP within
24 business
hours (non-holiday,
Monday-Friday) *

Success Coach
connects the DSP
with resources
to address need

*If the DSP has not been contacted within 24 business hours, they should send an e-mail to admin@georgiauplift.org

THANK YOU



Working Together Toward a More Stable DSP Workforce in Georgia

Empowering You Today = A Better Tomorrow



GEORGIA UPLIFT
helps you build on
the stability, support
and success you
want and deserve
for your life
and work.



2026 Georgia Provider Meetings

September 2026



Disclaimer

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Using Therap should neither circumvent nor take precedence over required care, nor should it impede the human intervention of care providers in a manner that would have a negative impact on any individual's well being.

Seek professional advice on specific issues and their impact regarding any individual or entity. No liability can be accepted for any errors or omissions or for any person acting or refraining from acting on the information provided in these materials and/or presentations.

Any discussion of future functionality is intended for informational purposes only. It is not a commitment to deliver any material, code, or functionality, nor should it be relied upon in making purchasing decisions. The development, release, and timing of any features or functionality described is at the sole discretion of Therap.

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Georgia Therap Support Team



Tarin Tripp

Senior Support Specialist II,
State Team



Dr. Ishya "Shae" Dotson

Assistant Director of Support,
State Team



Jason Laws

Director of Quality
& Data Initiatives



Heather Daily

Business Development
Territory Manager

Therap’s Leadership Team for Georgia



Justin M. Brockie
Chief Operating Officer



Jeff Case
National Director of Business Development



Sazzad Rafique
Chief Information Officer



Jeff Covington
Director of Support, State Team

Therap’s Project Team for Georgia



Jason Laws
Director of Quality &
Data Initiatives



Heather Daily
Business Development
Territory Manager



Gloria Caballero
Project Manager, State Team

Therap’s Technical Team for Georgia



Khandker Raska Urzoshi
Deputy Director of EVV & QA



Sarah Papenhausen
Senior Business Analyst



Nadine Finch
Director of Billing and EVV



Fahmida Asir
Deputy Director of Billing & QA

Therap’s Support Team for Georgia



Dr. Ishya “Shae” Dotson
Assistant Director of Support,
Person Centered Practices



Tarin Tripp
Senior Support Specialist II,
State Team



Toni-Ann Larnaitis
Senior Support Specialist II, State Team Billing

Last update: 02/25

Agenda

- ❑ **Where We Started: Review**
 - ❑ Individual Plan + Pre Service Auth
 - ❑ Document Storage
 - ❑ SComm
 - ❑ HRST Alerts
- ❑ **Where We Are Going: Look Ahead**
 - ❑ Full Referral
 - ❑ Incentive Modules
 - ❑ Behavior Support Plan Pilot
 - ❑ Provider Sharing
- ❑ **Training and Resources**





Where We Started: Initial Implementation

Phase I Modules

Individual Plan

WHO:

Anyone Individual on their Caseload
and
ISP Plan View super role

WHAT:

- Read Plan
- Acknowledge

Pre-Auth

WHO:

Anyone Individual on their Caseload
and
Service Auth View and/or Acknowledge Super Role

WHAT:

- View and/or
- Acknowledge Auth
for the Agency

Document Storage

WHO:

Anyone Individual on their Caseload
and
Doc Storage Super roles or Admin privileges

WHAT:

- View Documents uploaded by DBHDD
- Store your own Individual Documents

SComm

WHO:

Based on type of SComm permissions assigned

WHAT:

- SComm within provider
- **Multi Provider SComm** (Based on permission)

To Do Tab

Therap[®]

HomePage

Search

Logout

Modules

HighMediumLow

Individual Plan - New | Search

Acknowledge7

Pre Auth Service Authorization

Pending Acknowledgement1

Today

Tue, 3 Mar 2026

HomePage

Configure Favorites

Collapse Sections

Issue Tracking

New

My Issues

To Do

Individual Home Page

Individual

Reporting

Health

Employment

Billing

Items are still searchable once they “fall off” your to do tab

Individual Plan: Acknowledge

Therap

HomePage

Search

Megan (DEMO-MA)

Logout

HomePage

QA

Configure Favorites

Collapse Sections

Issue Tracking

New

My Issues

Individual Plan - New | Search

Modules	High	Medium	Low
Individual Plan Agenda - New Search			
Pending Meeting Minutes		1	
Worklist			
Approve		1	
Acknowledge		3	
T-Log - New Search			
View	-	-	5
General Event Reports (GER) - New Search			
Review	1	2	-
Approve	1	2	-
Followup	-	1	1

Today

Tue, 3 Mar 2026

Issue Tracking

New

My Issues

https://secure.therapservices.net/ma/ip/planAggregatedAckLister?title=label.ip.list&countNames=otacIpAcknowledgeList&listType=LT_OTAC_ISP_ACKNOWLEDGE

All users with the individual on their caseload **and** 'ISP Plan View' on their Super Role can Acknowledge the Plan



Individual Plan: Unified Search

Sections

To Do

Individual Home Page

Individual

Reporting

Health

Employment

Individual Plans

Personal Focus Worksheet

New | Search

Individual Plan Agenda

New | Search

Health Assessment

New | Search | Expiration Report

Individual Support Plan

New | Search | Expiration Report

Intake Assessment

New | Search | Expiration Report

Supported Employment

New | Search | Expiration Report

Individual Plan

Acknowledge | Search

Unified Search

Pre-Auth: Acknowledge

Tabs

To Do

Individual Home Page

Individual

Modules

High

Medium

Low

Pre Auth Service Authorization

Pending Update Acknowledgement

Pending Acknowledgement

Shared Comments

1

1

1

Notifications of Auth updates on To Do tab

Tabs

Sections

To Do

Billing

Pre Auth Service Authorization

Service Authorization

Search

search Pre-Auths from the billing tab

Pre-Auth: Components

Service Authorization

Pending Acknowledgement ⓘ

Demographic

Individual Name	Abigail Scott ⓘ	Oversight ID	12345
DOB	06/25/1962	Age	62 years
Medicaid No.	001-23-4567-G	Gender	Male
Residential Address	123 Main St., Anytown, CT 12345, USA		
Residential Phone	123-456-7890		



Service Authorization

Program	COMP - Comprehensive Support Waiver Program	Service	CAG - Community Access - Group - Facility
Service From Date	01/31/2026	Service To Date	05/24/2026
Service Provider		Rate Amount	
Total Units	2400.00	Total Amount	\$8760.00
Service Amount	8760.00	Unit of Measure	Hour
Frequency	Weekly	Prior Auth Number	1234567890
Diagnosis Code	F71		
Description			

Pre-Auth: Components

Shared Comments

Comments	Commented By	Comment Date	Acknowledged By	Action
No comments have been added				

Add Shared Comments

Print PDF

Back

Cancel

Acknowledge

Use Shared Comments to communicate issues with Auth

Acknowledge Auth to indicate it is received and accurate

Doc Storage:Search

Tabs

Sections

Individual

Health

Employment

Billing

Care

Behavior Data

New | Search | Report | Search Report

Behavior Plan

New | Search

Case Note

New | Search | Bulk PDF | Dashboard

Consent and Authorization

New | Search

Document Storage

New | Search

Modules

Case Note

Document Storage

New

List

Search

General Event Reports (GER)

GER Resolution

Health Screening

Health Tracking

Individual Care Plan

ISP Data

ISP Program

MAR Data

T-Log

Time Tracking

Search Documents from the Individual tab or the Individual Home Page

Doc Storage: Search

Document Search

Please select any of the following fields - Received Date From or Upload Date From or Form ID or Individual.

Individual

Isabella Johnson

Entered By

Search

Form ID

File name/Description

Type

- Please Select -

Received Date From

12/20/2025

To

MM/DD/YYYY

Upload Date From

MM/DD/YYYY

To

MM/DD/YYYY

Status

Active

GMCF Determination (DBHDD-GA)

Guardianship Document (DBHDD-GA)

Health and Safety Protocol (DBHDD-GA)

Home Medication Verification (DBHDD-GA)

HRST (DBHDD-GA)

Human Rights (DBHDD-GA)

Clear Selection

Cancel

Search

- Review search criteria carefully.
- May need to remove auto populated date
- Document Types from DBHDD will be indicated by: (DBHDD-GA)

Doc Storage: Search

Document Search

Filter

15 Records

Form ID	Individual	Status	Description	Upload Date	Updated Date	Type	Received Date	Valid From	Valid To	Entered By	File Size	Provider Code	Time Zone	Document
DOC-DEMO-P4B4M9EZZLMS8	Johnson, Isabella	Active	This document contains details of the recent lab tests results of Isabella Johnson.	02/01/2025	02/01/2025	Lab Result	02/01/2025	02/01/2025	02/28/2025	Cole, Mia	5.62 MB	DEMO-TH	US/Eastern	Lab tests results of Isabella Johnson.docx

Showing 1 to 1 of 1 entries

New Search

Export to Excel

Cancel

Back

Provider Code will indicate if it came from DBHDD

Secure Communications (SComm)

Therap[®]

HomePage

Search

Megan (DEMO-MA)

Logout

Tabs

To Do

Favorites

Individual Home Page

Individual

Reporting

Health

Employment

Billing

Ethan (Ethan Williams, 09...
098765

Jay or Jayden (Jayden Da...
1234

Miranda Andrade, 1234
1234

Kathleen Hughes

Brian Lewis

Brittany Adams, 12345 01/...
12345 01/23/1989

Ava Martinez

Amari Choi

Brandon (Brandon Jackson)

Issue Tracking

New

My Issues

SComm

Inbox (25)

Sent Items

Compose

Drafts

Custom User Group

Classes

Ove

Due

Back to Top



Secure Communications (SComm)

Message Type(s)



General

Message **NOT** specific to an individual

Cross Provider SComm?

☒

Oversight(s)

Therap Oversight Demonstration Provider (DEMO-...

>



Individual Care

Message containing individual specific information

Communicate with SCs and DBHDD

Select Recipient(s)

CommonProgramCustom User GroupLimited Access User

Filter

To Select All Recipients [Click Here](#)

10Records

☐	Last Name	First Name	Title	Provider Name
☐	Allen	Charles	Provi	Therap Demonstration Provider
☐	Ada	Mays	Direc	Therap Demonstration Provider
☐	Anderson	Jacob	Syste	Therap Demonstration Provider
☐	Brian	Harris	Thera	Therap Demonstration Provider
☐	Barnes	Tracy	Direc	Therap Demonstration Provider
☐	Cole	Mia	Therap Administrator	Therap Demonstration Provider
☐	Gibson	Megan	Program Manager	Therap Demonstration Provider
☐	Hall	Steven	Program Manager	Therap Demonstration Provider
☐	Jenkins	Charles	Direct Support Professional	Therap Demonstration Provider
☐	Sanders	John	Direct Support Professional	Therap Demonstration Provider

Showing 1 to 10 of 94 entries

<

1

2

3

4

5

...

10

>

Add Recipient(s)

©Therap Services, LLC. All Rights Reserved. See Retention of Rights Slide

Compose

Inbox6

Sent Items

Drafts

Trash

My Folder(s)

Settings

* Recipient(s)

Search

Henderson, Karen / Registered Nurse (Therap Demonstration Provider)✕

* H/M/L

Medium

▼

* Subject

Medical Schedules

B

I

U

≡

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≡

≡

≡

≡

12pt

▼

≡

≡

↶

↷

Hi,

Please find the medications and their schedules attached.

John

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HRST Alerts

Tabs

To Do

Modules

High

Medium

Low

Alert

Open1

Filter

15Records

Form ID	Oversight ID	Individual	Alert Name	Reference Form ID	Status	Action	Summary	Create Date	Resolve Date	Time Zone
ARR-DEMO-PDT32JQ52MULL	OSID12345 (DEMO-OS)	Johnson, Isabella	Person Provider Association Update		Open	Updated	HRST Provider information Updated	12/05/2025 11:15 AM		US/Eastern

Showing 1 to 1 of 1 entries

New Search

Cancel

Back

HRST Alerts

Alert

open

Demographic

Individual Name

Isabella Johnson

DOB

09/01/1997

Medicaid No.

000-01-1111-J

Oversight ID

OSID12345 (DEMO-OS)

Age

28 years 2 months

Alert

Reference Form ID

Alert Name

Person Provider Association Update

Action

Updated

Summary

HRST Provider information Updated

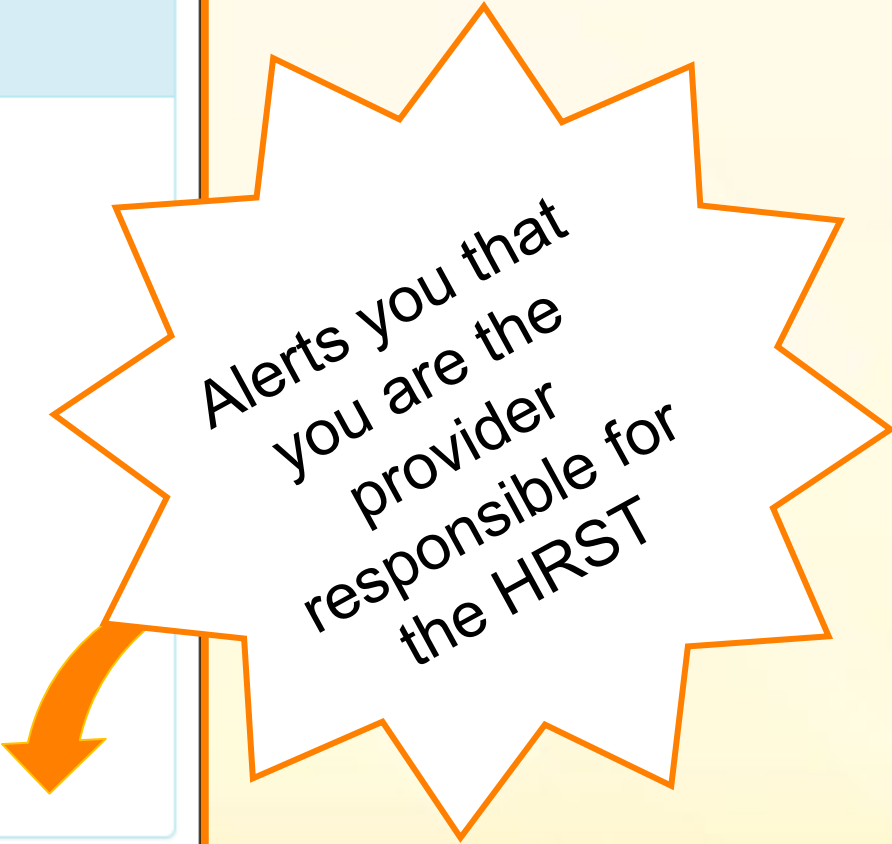
Description

Service Provider :: GA016988 - Therap
Demonstration Provider
Service :: CL1 - Community Living Supports
Date :: 10/01/2025 - 12/25/2025

Cancel

Back

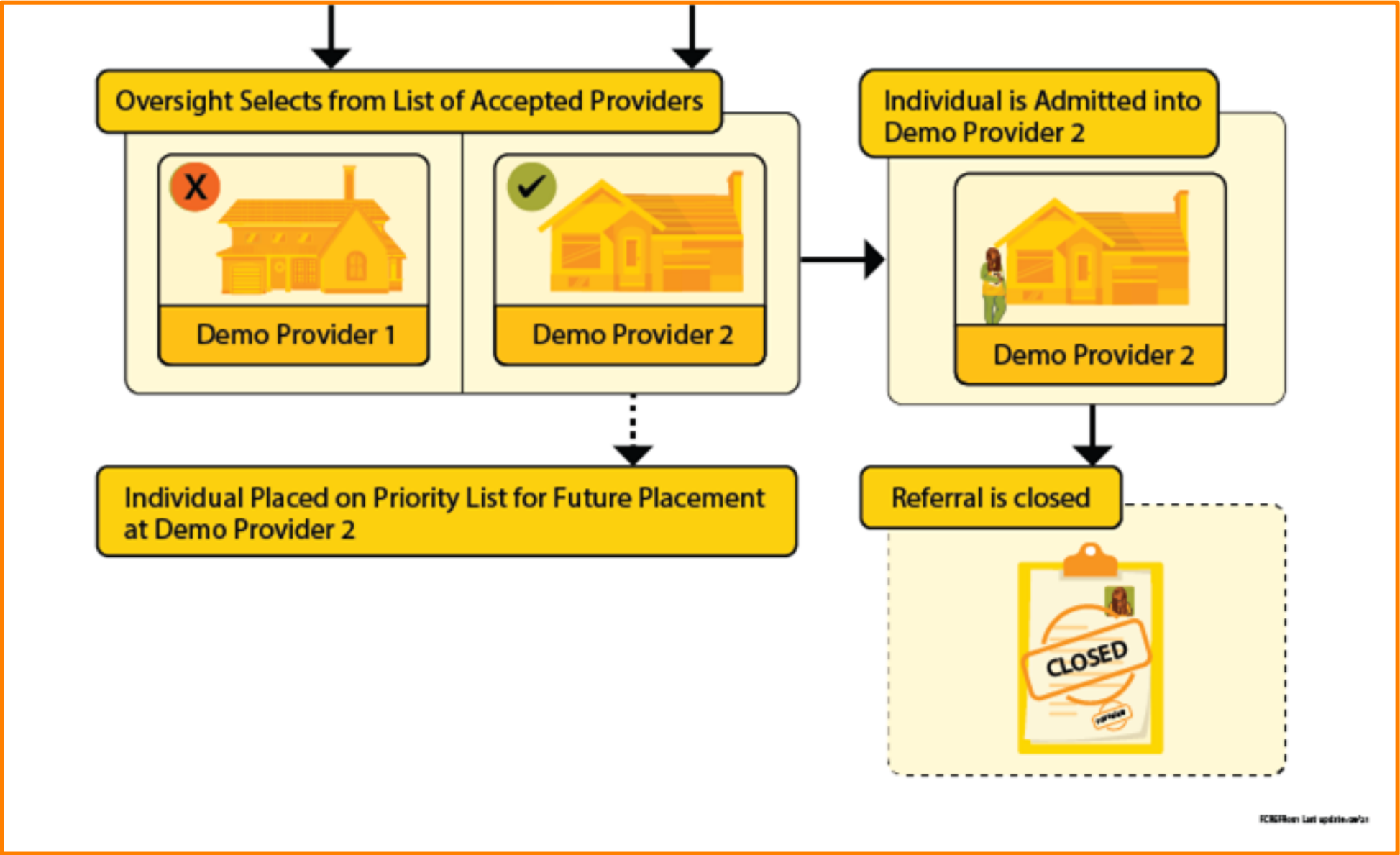
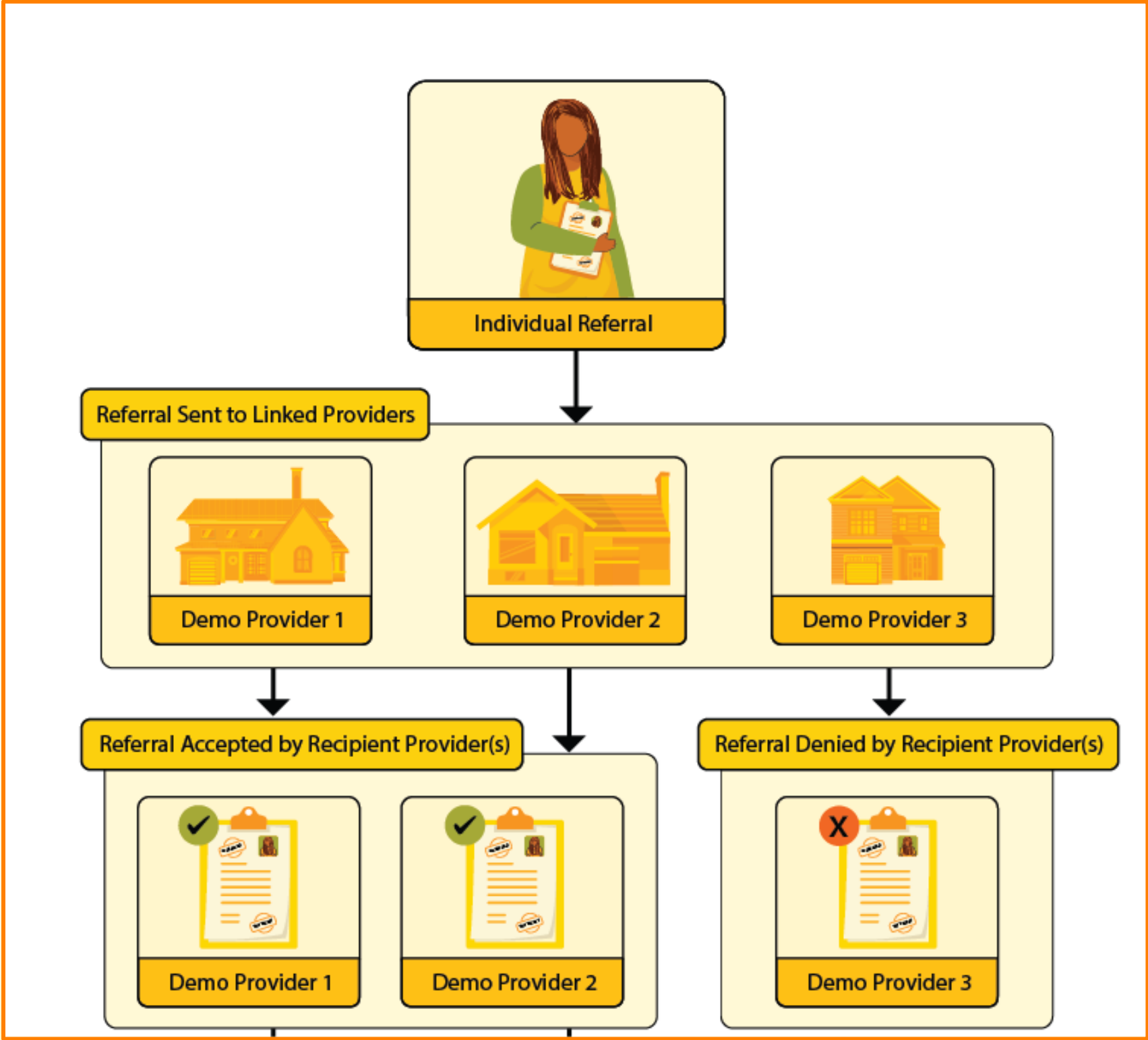
Resolve





Where We're Going: Continued Therap Usage

Therap Full Referral



Incentive Modules Provider Training

Two webinars/month +
Schedule 1:1 implementation
support

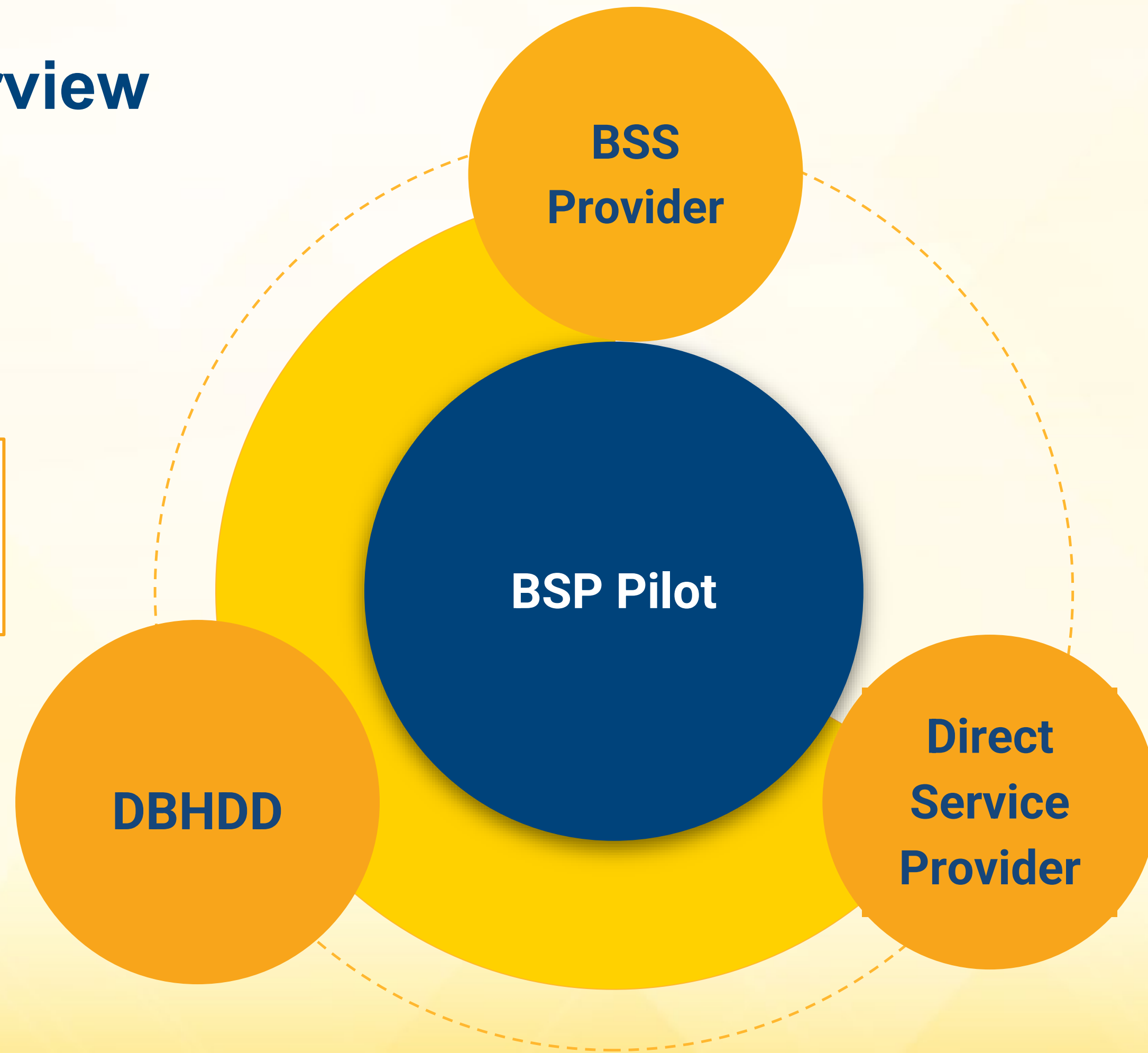
- 90 min deep dive
- 60 min open Q&A



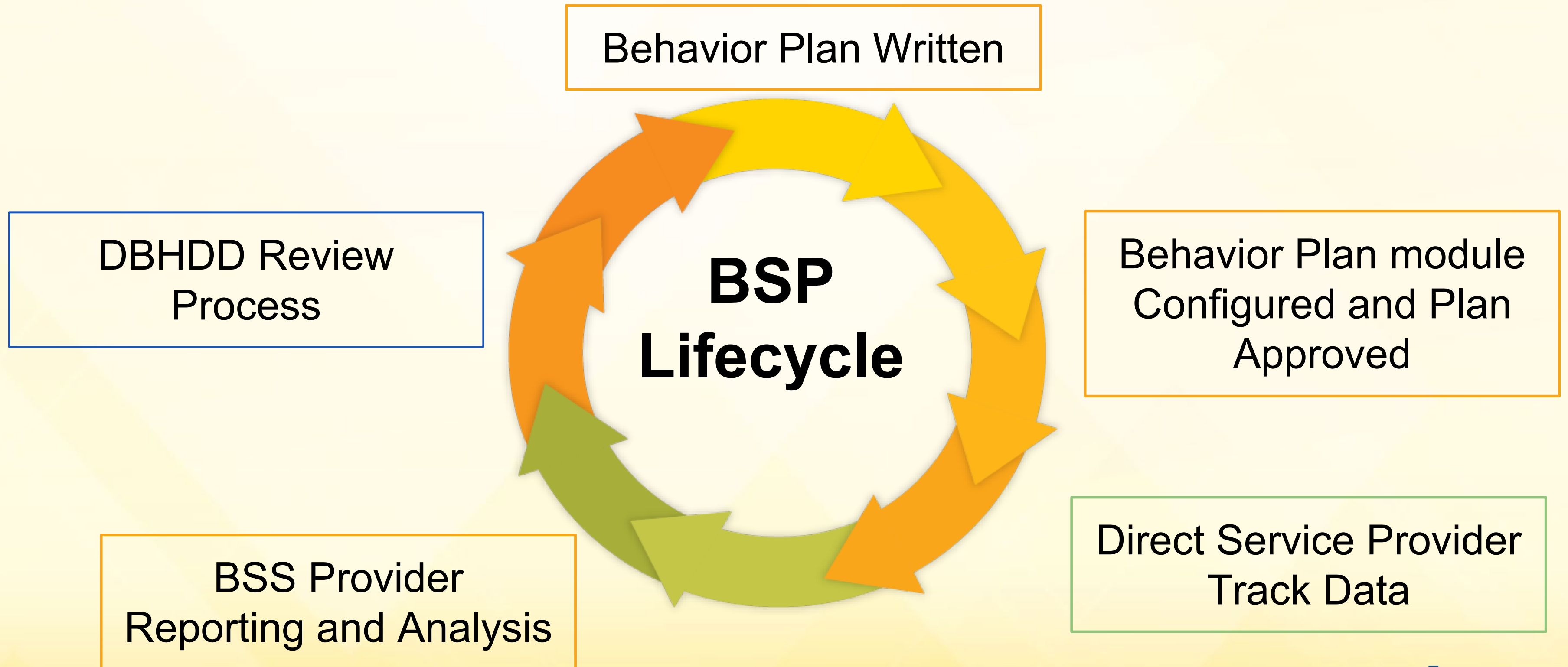
August	Goal Tracking in Therap	• ISP Programs • ISP Data • ISP Reports
September	Beyond Health Tracking: Tools for Nursing and Clinical Services	• Health Plus • Case Note+ Questionnaire • Health Reports
October	DDP Reviews & QA in Thearp	• Case Note+ Questionnaire • IPOP • Reporting across the Application
November	PCP Tool box	• CtLC • Personal Focus Worksheet • Individual Plan Agenda • IPOP

BSP Pilot Overview

Comprehensive Pilot group that represents all parts of the BSP lifecycle



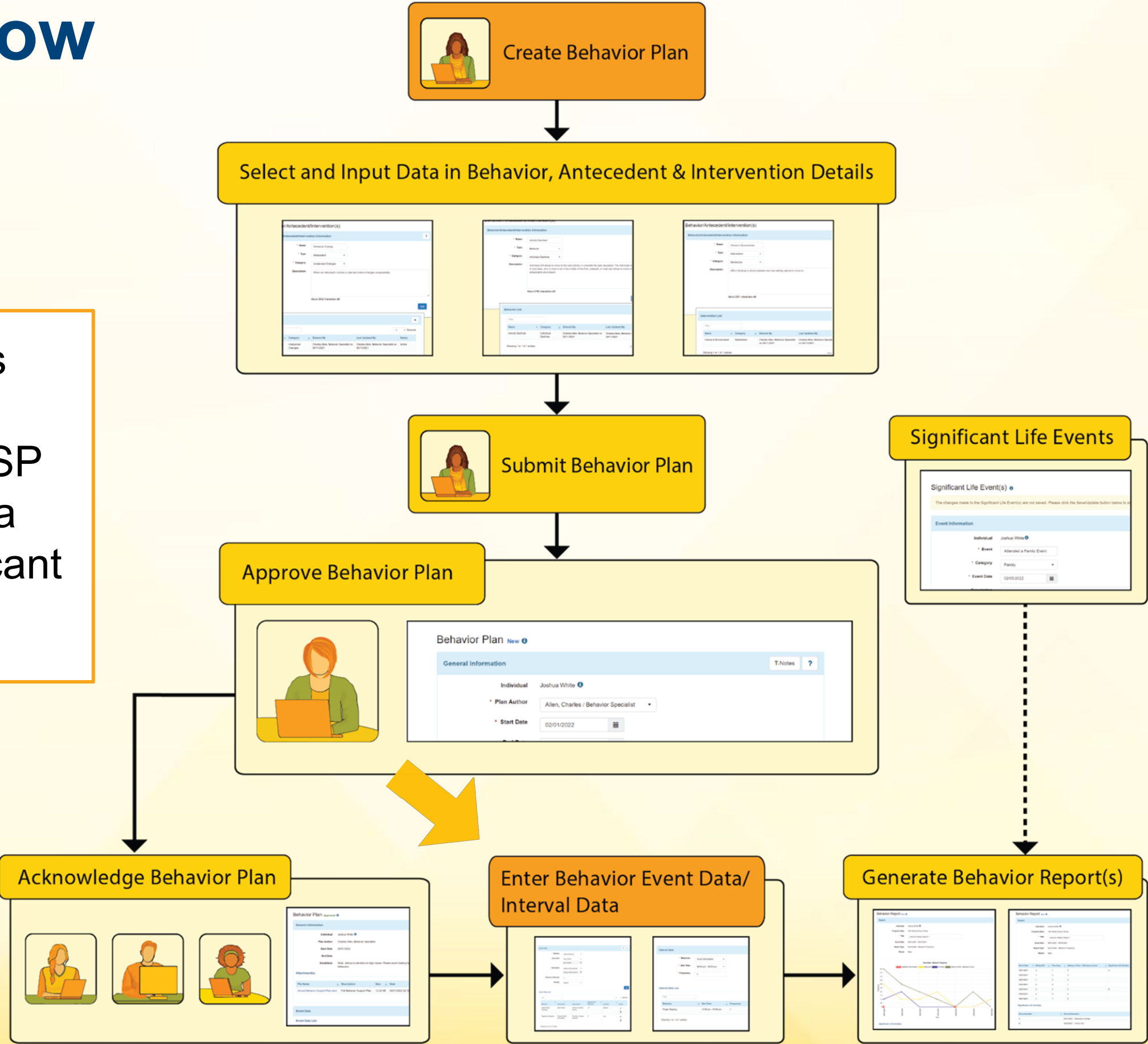
The Lifecycle of the Behavior Support Plan Module



BSP Workflow

Direct Service Providers are responsible for:

- Acknowledging BSP
- Entering BSP Data
- Recording Significant Life Events



Provider Sharing - Coaching & Referrals

SCs can now assign Coaching & Referrals to share with Providers in Therap

Modules

HighMediumLow

Task Tracker (Individual)

Unassigned3

Pending Oversight Review1

Pending Completion2

Task Draft

General Information

Unassigned

Project

Individual Focused Documentation Training

Assignee

Jacob Anderson, Support Specialist

Provider Sharing - Coaching & Referrals

Task **Draft** ⓘ

General Information

Project Individual Focused Documentation Training

Summary Develop Training Content

Pending Oversight Review

Task **Draft** ⓘ

General Information

Project Individual Focused Documentation Training

Summary Develop Training Content

Pending Oversight Review

Cancel

Back

Edit

Delete

Return To Provider

Provider Sharing - Coaching & Referrals

Task **Draft** ⓘ

General Information

Pending Oversight Review

Project Individual Focused Documentation Training

Summary Develop Training Content

Cancel Back

Edit Delete **Return To Provider**

Communication between SCs and Providers when coaching & referrals are complete!

Cancel Back

Edit Delete **Complete**

Task **Approved** ⓘ

General Information

Completed

Project Individual Focused Documentation Training

Summary Develop Training Content



Therap[®]

Training & Resources

Training & Resources

GA Specific Support Page

GA Specific Support inbox:
GAsupport@therapservices.net

Live Help

- Live agent general quick questions

Issue Tracker

- HIPAA compliant investigation



Therap | Person-Centered. Data-Driven.® Support Home States Overviews Training Events Q Login

Georgia | State Contract

Therap is proud to announce a new partnership with The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD). This brand new collaboration will allow the state to take a bold step forward toward modernizing the system of care and providing greater coordination of care, significant efficiencies, and enhanced communication. The Therap system will tie together a full range of state and provider processes to create a simplified, integrated structure to facilitate quality service delivery and positive outcomes for individuals.

Therap for States 2026.2.1 Released > GA Specific Guidance >

Training & Resources

We are continuing forward.

Ongoing GA Training

- Webinars
- Guides
- Short Videos



Thank you!



QEPR Review

Billing Validation Component

Georgia Collaborative ASO/Qlarant
Paula Dooley, QEPR Manager

Quality Reviews

The Goal of Quality reviews is to monitor and evaluate quality across IDD services provided by Georgia's Department of Behavioral Health and Developmental Disabilities (DBHDD) network of providers.

The Quality Enhancement Provider Review (QEPR) is conducted by Qlarant as part of the Georgia Collaborative ASO, in partnership with DBHDD. The review focuses on indicators measuring compliance and quality of your organization's systems and practices, and adherence with the Provider Manual for Community Developmental Disability (DD) Providers and NOW/COMP Waiver Manuals.

Beginning October 1,
2026, the QEPR
review process now
includes a **Billing
Validation
Component**





“Hold Harmless”

The provider’s first billing
validation review =

“Hold Harmless”

at the discretion of DCH and
DBHDD.

Billing validation will not be
included in the provider’s
QEPR scores.

Georgia Collaborative Provider Handbook

<https://s18637.pcdn.co/wp-content/uploads/sites/15/The-Georgia-Collaborative-Provider-Handbook.pdf>



All records must be presented within the timeframes indicated in the Georgia Collaborative Provider Handbook; records not submitted within stated timeframes will not be accepted by the quality assessor for review.

Additional information related to review procedures can be found in this Handbook available online at The Georgia Collaborative ASO website.

Accessing Records – same as QEPR

For providers using an Electronic Record system, the platform must be configured to allow DBHDD and its proxies (i.e., the Georgia Collaborative ASO/Qlarant), as well as any other authorized external reviewing entities, full administrative access (view-only) to all components of the electronic system.



This access must include the ability to:

- Validate document creation date, time, and author; Time stamp of signatures; Dates, time stamps, and author(s) of any edits, amendments, or late entries;
- View the original content, prior to any editing or amendments, without deletions; and Dates and time stamps for documents uploaded to the system.

Billing Validation Review Process

Billing Validation Review Expectations

The billing validation review is calculated as justified vs. unjustified for the reviewed claims.

A billing review will be completed of randomly selected dates of claims/encounters for all individual records selected for the QEPR sample.

Per DCH and DBHDD standards, documentation in the individual's record is reviewed and compared with...

GAMMIS

- Medicaid claims

Carelon's Provider Connect

- State funded claims

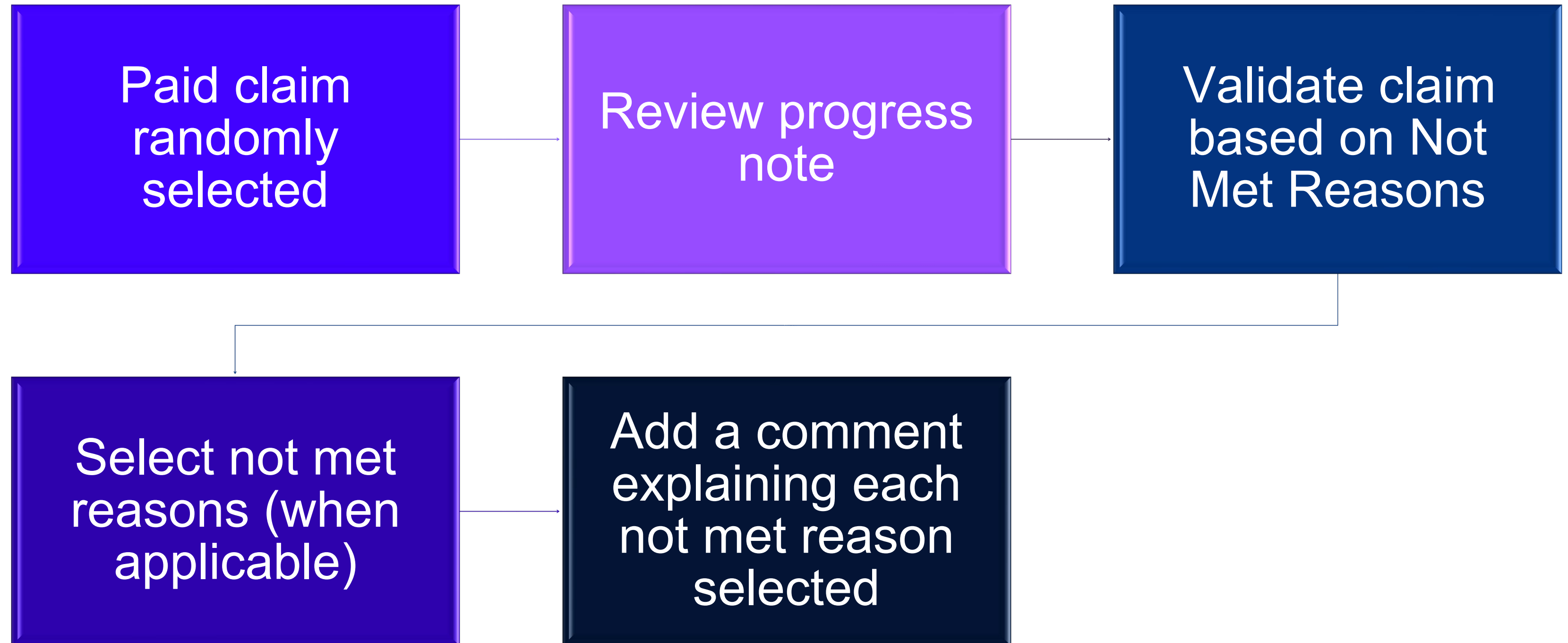


Provider Size	Caseload	QEPR Sample Size
Small	Caseload: 1 to 30	1 to 8 records
Medium	Caseload: 31 to 99	8 to 15 records
Large	Caseload: 100 and higher	15 to 30 records

No change in record review sample

Record review samples are selected based upon 3-6 months of paid claims (waiver and state funded)

Claims Review Activities



Claims Review

Billing Claims/Encounters

- Between 3-10 claims/encounters will be randomly selected per individual

Span Billing = groups one service across a continuous range of consecutive dates into a single line item or claim.

- For example: All of April's Community Access Group (CAG) claims/encounters for one individual are submitted together on one claim = span billing
- **Note:** This is different than batch billing
 - Batch billing groups multiple distinct claims/encounters for different individuals or services to process and submit them all together at one time
 - For example: Community Access Group (CAG) and Community Access Individual (CAI) are submitted together for a week of service = batch billing
 - Claims submitted via batch will be reviewed separately

Span Billing Procedures

- Qlarant will review the entire month of April's progress notes when span billing occurs
- For records with span billing, the number of claims/encounters will be 1-2

Paid Claim Examples: Community Access Group (T2025-HQ)

Daily Billed claim (3-10 claims reviewed)

Detail List																?	^
#	ST	FDOS	TDOS	Proc-Mod	Amt Billed	Units Billed	DX Rel1	DX Rel2	DX Rel3	DX Rel4	Emer	POS	TPL Amount	TPL Coinsurance	TPL Deductible		
1	P	1/27/2026	1/27/2026	T2025 - HQ	87.60	24	1					99	.00	.00	.00		

Span billed claim (Monthly) 1-2 claims reviewed

Detail List																?	^
#	ST	FDOS	TDOS	Proc-Mod	Amt Billed	Units Billed	DX Rel1	DX Rel2	DX Rel3	DX Rel4	Emer	POS	TPL Amount	TPL Coinsurance	TPL Deductible	F	
	P	1/1/2026	1/31/2026	T2025 - HQ	1,624.25	445	1					99	.00	.00	.00	C	

Span billed claim (Weekly) 1-2 claims reviewed

Detail List																?	^
#	ST	FDOS	TDOS	Proc-Mod	Amt Billed	Units Billed	DX Rel1	DX Rel2	DX Rel3	DX Rel4	Emer	POS	TPL Amount	TPL Coinsurance	TPL Deductible	Re	
1	P	7/1/2022	7/7/2022	T2025 - HQ	409.20	120	1					99	.00	.00	.00	00	

Billing Questions

Medicaid Waiver Claims

- Gainwell Representative
- <https://www.mmis.georgia.gov/portal/PubAccess.Provider%20Information/Provider%20Manuals/tabId/18/Default.aspx>

State Funded Claims

- The Georgia Collaborative ASO Customer Service
- <https://www.georgiacollaborative.com/contact-us/>

DBHDD PIMS+

- Questions related to documentation requirements
- <https://dbhddpims.Zendesk.com>

Billing Validation Review Tool

Indicator:
Does documentation support the claim
billed?
Yes or No



Billing Validation Review Tool

Not Met Reasons:



Service not included on approved individual service plan.



Intervention unrelated to individual service plan.



Progress note does not include the individual's response to intervention.



Services billed did not accurately reflect the services documented.



Content of documentation is not unique.



Multiple services billed at same time.



Documentation does not support units/time billed.



Documentation reflects a non-covered service.



Progress note is missing.



Beginning and ending time when service was provided.



Date of service incorrect or missing.



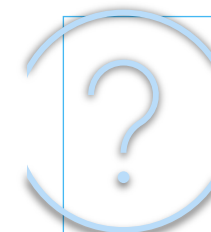
Location missing or not allowable.



Progress note is missing staff's signature.



Progress note is missing staff's title.



Progress note is illegible.



Record not submitted for review with full electronic EMR access or paper record.

QEPR Billing Validation Review

References:

DBHDD Provider Manual for Community DD Providers and State-Funded DD

(July 1, 2026),

NOW/COMP General Manual Part II, Chapters 600-1200, Policies and Procedures

(July 1, 2026)

Part III Policies and Procedures for New Options Waiver Program (July 1, 2026)

Note:

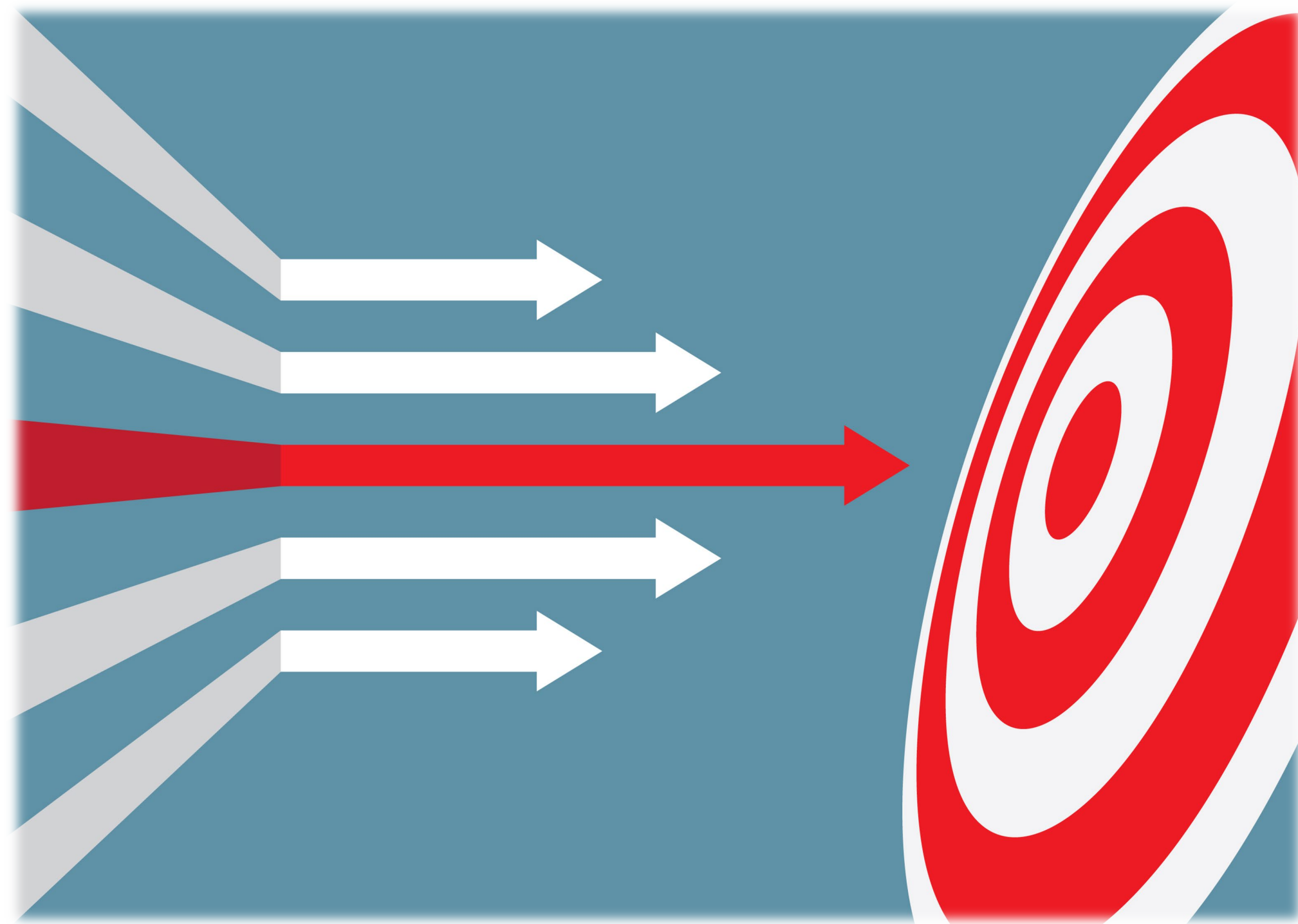
Citations are updated quarterly as needed to reflect waiver manual updates.

Activity Notes/Learning Logs are referred to as “progress notes.”

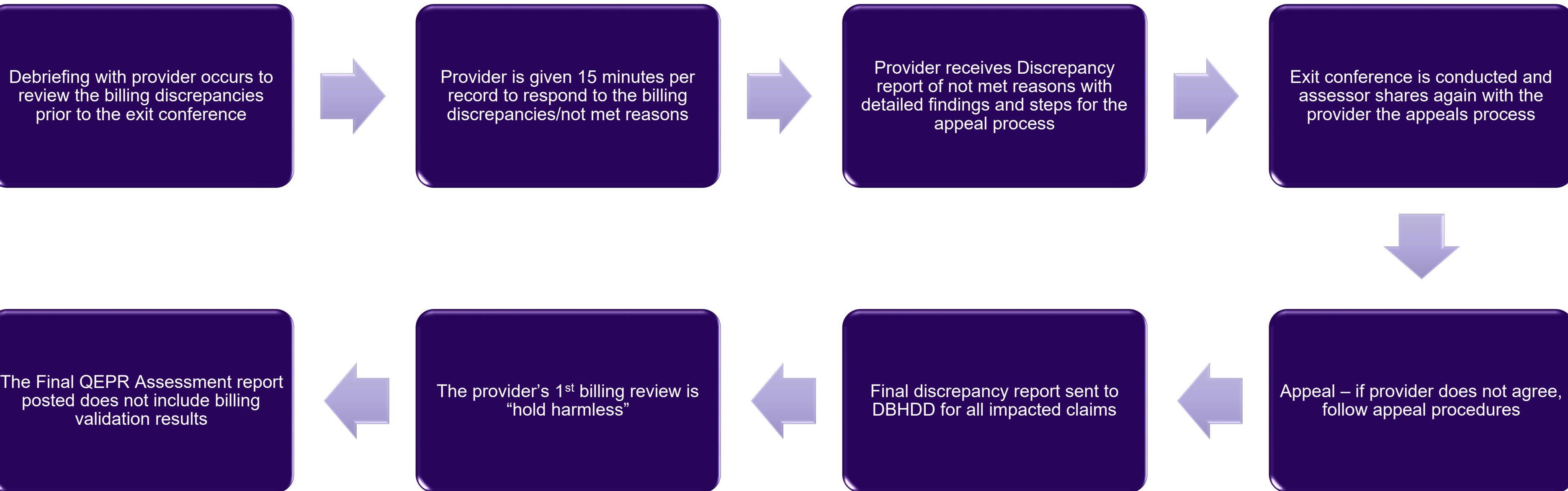
More than one not met reason can be selected for each progress note.

Quality Enhancement Provider Review (QEPR)

Process Changes



QEPR Process Changes to the Exit Conference



New: Billing Discrepancy Report

Individual Key	Service Code	Funding Type	Service Start Date	Service End Date	Units Paid	Units Justified	Rate Per Unit	Paid	Justified	Reason	Comments
2	T2025HQ	COMP	11/18/2025	11/18/2025	24	0	\$3.65	\$87.60	\$0	Content of documentation is not unique.	Content does not support units billed as the documentation within this note is duplicated throughout the record using the exact same verbiage documented in progress notes throughout the entire month of November and not unique to the service delivered.

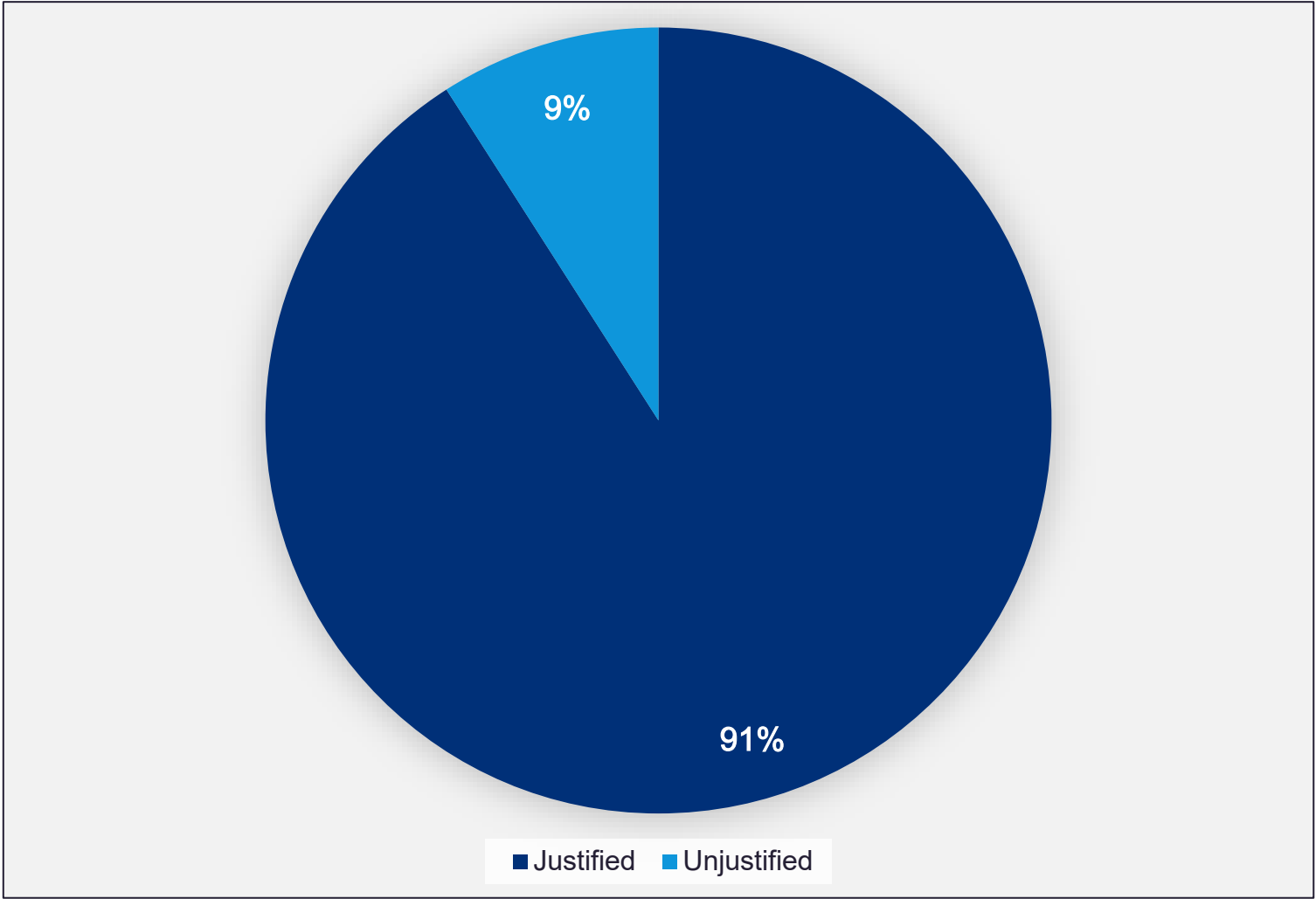
Reasons by Service		
Service	Billing Error	#
CAG	Content of documentation is not unique.	1

	COMP Waiver Services	NOW Waiver Services	State Funded Services	Total
Justified	\$0	\$0	\$0	\$0
Unjustified	\$87.60	\$0	\$0	\$87.60
Total	\$87.60	\$0	\$0	\$87.60

Exit Conference Report Changes

Billing Review Component

Billing Validation Review: 91%	
Not Met Reasons	# Discrepancies
Content of documentation is not unique.	3
Services billed did not accurately reflect the services documented.	10
Progress note is missing staff's signature.	2



	COMP Waiver Services	NOW Waiver Services	State Funded Services	Total
Justified	\$5,456.21	\$0	\$1,345.05	\$6,801.26
Unjustified	\$0	\$678.34	\$0	\$678.34
Total	\$5,456.21	\$678.34	\$1,345.05	\$7,479.60

FY27 QEPR Scoring Methodology: No Change

**QEPR reviews
will Continue
with the
current QEPR
scoring
methodology**

Review Components		Percent Met	Weighted Score
Provider Record Review	Safety	100%	20%
	Whole Health	100%	15%
	Person -Centered Practices	100%	15%
	Community Life	73%	12%
	Rights	100%	12%
	Choice	83%	10%
Staff Qualifications and Training		98%	10%
Service Guidelines		99%	6%
Overall Score			95%

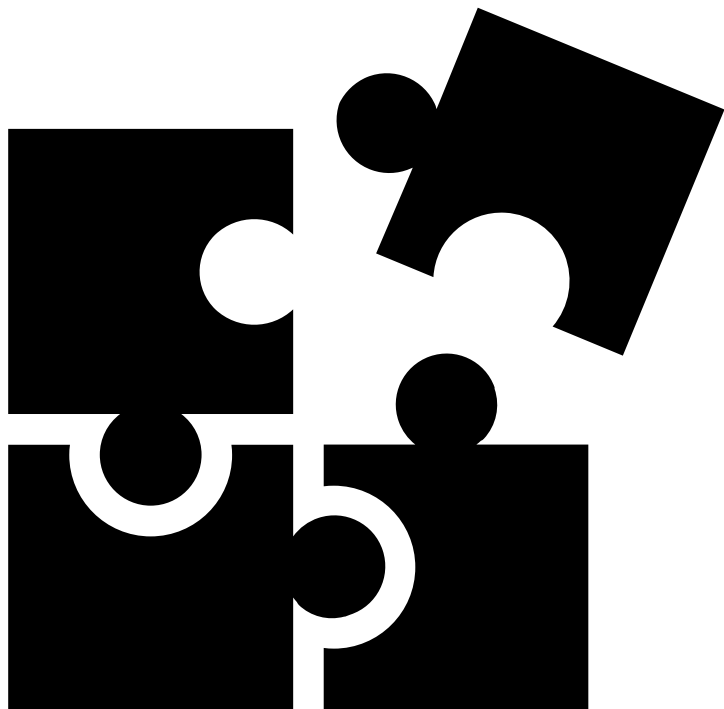
FY27 QEPR Components (not included in the overall score)

Review Components	Percent Met
Administrative Review	100%
Billing Validation Review	91%

The Administrative and Billing Validation components will include a percent met score that is not included in the QEPR overall score.

The Billing Review summary will only be included in the Exit Conference Report and not the Final Report that is posted to the Georgia Collaborative ASO website.

QEPR process will continue with including...



Immediate Action Items
Progress notes did not meet documentation requirements (date, location of service delivery, signature [title], and begin/end times).
Documentation contained duplicated notes.
Concerns regarding the validity and accuracy of individuals' records were found in documentation.
Documentation identified concerns with the validity and accuracy of staff records.

thank you

GAQuality@Carelton.com

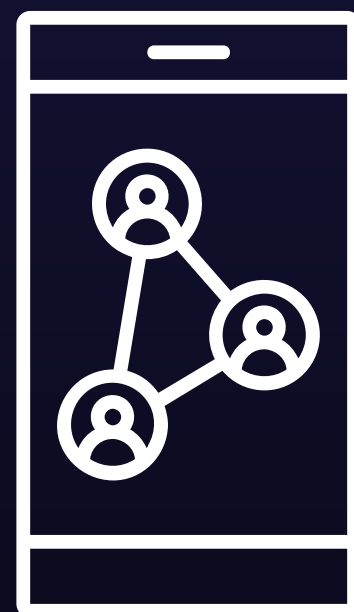


Questions?



D·B·H·D·D

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