Dear Colleague:

Please find enclosed the final bulletin entitled Service Definitions for the Pennsylvania Mental Retardation Program. This document is being forwarded to you for your information and for sharing with providers and other colleagues. The current 2009-2010 service definitions, which were published in Bulletin 00-08-17, will remain in effect until June 30, 2010.

The purpose of this bulletin is to distribute new service definitions to be effective on July 1, 2010. Please note that although the service definitions are effective July 1, 2010, some of the changes are subject to review and approval by the Centers for Medicare & Medicaid Services.

Many questions were asked of ODP when the service definitions that were effective on July 1, 2009, were released and implemented. As a result, ODP has added clarification language to many of the Service Definitions that will be in effect on July 1, 2010. In order to highlight the changes, ODP has enclosed a comparison of the language from the service definitions that were effective July 1, 2009, to the language in the service definitions that will be effective on July 1, 2010. In addition, the following list, although not an exhaustive list, are items that ODP considers to be the most notable changes:

- Clarified when Waiver services are available to individuals who reside in a residential treatment facility, correctional facility on a temporary basis, or a drug and alcohol facility.
- Defined the phrase ‘integrated and dispersed in the community in noncontiguous settings’.
- Added language that enhanced levels of service are based on the individual's assessed needs and not on the worker’s qualifications.
- Added clarification on determining the correct service to meet the individual's assessed needs between Home and Community Habilitation (Unlicensed), Companion Services, and Waiver-Funded Respite Services.
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- Removed Supported Employment Services as a service that relatives, legal guardians, and legally responsible individuals may render.
- Changed Travel Policy to include the 50 United States, the District of Columbia, and the American Territories.
- Clarified language on approved program capacity in a community home.
- Removed Supported Employment Services from the list of habilitative services that may not be rendered at the same time as other services.
- Added language regarding the transportation responsibilities for Residential Habilitation, Home and Community Habilitation (Unlicensed) and Day Habilitation provider agencies.
- Added Prior Authorization requirement to Supplemental Habilitation.
- Added 'Additional Individualized Staffing' service to meet the long-term individualized staffing needs of an individual who receives Residential Habilitation. Service includes a Prior Authorization requirement.
- Added Prior Authorization requirement and language regarding the process a Provider will follow to request payment for a Permanent Vacancy.
- Added circumstances where payment for Permanent Vacancies may not occur.
- Clarified the 30-hour rule for Unlicensed Residential Habilitation.
- Language regarding the transportation responsibilities for Companion Services has been added.
- Removed the service limits for Supports Coordination.
- Removed Supported Employment Services as a participant-directed service.
- Removed the requirement for prior authorization of Nursing services and removed the list of medical conditions.
- Clarified the Behavior Support service definition regarding the supervision requirements.
- Clarified how to calculate Respite 24 Hour services.
- Added the modifier ‘U2’ to Waiver-Funded Licensed Out-of-Home Respite 24 Hours indicate when Emergency Respite is rendered in a licensed Waiver-funded 6400 home in which ODP permitted the provision of respite services beyond the approved program capacity of the home.
- Clarified how the rate for Transportation (Mile) will be calculated.
- Added that Transportation (Mile) may be reimbursed for round trip and specified associated parameters.
- Removed the Home Finding service as an eligible service.
- Defined the term ‘private home’ as it is used in the Home Accessibility Adaptations service definition to include privately-owned family living homes.
- Clarified how the Home Accessibility Adaptation limits are calculated.
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- Clarified how the Vehicle Accessibility Adaptation limits are calculated.
- Revised the requirements for Homemaker/Chore service to say ‘unable to physically perform and financially provide’.
- Added the modifier ‘U2’ to Base-funded Respite Care, 24 Hours to indicate when Emergency Respite is rendered in a licensed Waiver-funded 6400 home in which ODP permitted the provision of respite services beyond the approved program capacity of the home.
- Removed Base-Funded Respite, 15 Minutes as an eligible base-funded service.
- Clarified that overnight camp and day camp for individuals funded through base funds is part of the Recreation/Leisure Time Activities service definition (that is, not part of the Waiver-funded Respite Camp services).
- Added the modifier ‘ET’ to specified services to accommodate unanticipated emergency situations.
- Allowable funding information, places of service, ages, and provider types and specialties were added for each service (throughout document).

Although other changes were reflected in the draft of the service definitions when the document was released for public comment, ODP has decided to consider any additional changes for future implementation.

The service definitions narrative available in Home and Community Services Information System (HCSIS) will be updated in the near future to reflect the final service definitions document.

Questions regarding this bulletin should be directed to the appropriate Regional Program Manager.

Sincerely,

Kevin T. Casey

Enclosures