SCOPE:

Administrative Entity Directors or Administrators
County Mental Health and Mental Retardation Administrators or Directors
Supports Coordinator Organization Directors
Providers of Licensed and Unlicensed Residential Habilitation Services

PURPOSE:

The purpose of this bulletin is to communicate the Office of Developmental Programs’ (ODP’s) policies regarding payment to licensed and unlicensed residential habilitation providers in Waiver service locations for bed reservation days (therapeutic and medical leave days), and permanent vacancy days.

BACKGROUND:

Prior to July 1, 2009 providers of waiver services contracted directly with Administrative Entities for waiver funded services. Although ODP provided Administrative Entities with a standard Waiver contract to utilize with all waiver providers, beginning in fiscal year (FY) 2006-2007, payments to residential habilitation providers for vacancies varied.

Effective July 1, 2009, ODP began implementation of a standard rate setting process. In addition, the residential habilitation service unit designation changed from a ½ month unit to a day unit. A residential habilitation policy was developed and implemented July 1, 2009, that outlined the reimbursement methodology to providers for bed reservation days (therapeutic and medical leave days), as well as permanent vacancy payments.

The ODP residential habilitation policy allowed payments to licensed and unlicensed residential habilitation providers operating waiver service locations for an unlimited number of medical leave days per individual each fiscal year, and up to 48 days of therapeutic leave per individual each fiscal year. In addition, the ODP residential habilitation policy allowed providers to request payment for therapeutic leave days in excess of the established 48 calendar days in a fiscal year.
The ODP residential habilitation policy also provided payments to licensed residential habilitation providers for permanent vacancies for individuals enrolled in the Consolidated Waiver. Permanent vacancy payments were permitted for up to 60 days, unless the provider used the permanent vacancy for an alternative purpose.

DISCUSSION:

Consistent with ODPs goals to provide services to individuals on the waiting list, fulfilling obligations to the Centers for Medicare and Medicaid Services, evaluating and modifying policies to support program integrity and improve operational efficiencies, the following bed reservation policy(otherwise known as therapeutic and medical leave and the permanent vacancy policy) will be implemented effective November 15, 2011.

This policy is applicable to waiver and base funded individuals with intellectual disabilities who are enrolled and receiving licensed or unlicensed residential habilitation services in a Waiver service location. County Programs may not supplement vacancy payments beyond the ODP established limits outlined in this bulletin for a waiver or a base funded individual enrolled with ODP that is receiving services in a residential habilitation waiver service location. This policy is not applicable to individuals with intellectual disabilities receiving base funding for residential habilitation services in a 100% base funded non-waiver service location.

A medical leave day is defined as: an individual's absence from the licensed (55 Pa Code Chapters 6400, 6500, 3800, 5310) or unlicensed residential habilitation waiver service location due to the individual’s admission to a nursing facility, acute care general hospital, rehabilitative hospital, rehabilitation unit of an acute care general hospital, or short term stay in a rehabilitation facility, psychiatric hospital, or psychiatric unit of an acute care general hospital for treatment and is expected to return to the residential habilitation waiver service location. The first day of absence for medical leave is the date the individual is admitted to the facility regardless of the length of the absence. The last day of the medical leave is the day before the date of discharge from the facility. On the date of discharge, the service is considered a residential habilitation service day, not a medical leave day, regardless of the number of hours the residential habilitation service is provided on that calendar day.

A therapeutic leave day is defined as: an individual’s absence from the licensed (55 Pa Code Chapters 6400, 6500, 3800, 5310) or unlicensed residential habilitation waiver service location to visit with a relative or friend. This includes absences when the individual is not receiving services from the residential habilitation provider during the absence. Based on the definition of a day unit, the first day of absence for therapeutic leave is defined as 12 to 24 hours of continuous absence within a 24 hour period between 12:00 a.m. and 11:59 p.m. when the individual is not accompanied by or receiving services from, the licensed or unlicensed residential habilitation service provider. If the individual's therapeutic leave begins immediately after another service ends, such as day services, then the absence from the residential habilitation service begins when the other service ends.

A permanent vacancy in a waiver service location licensed under 55 Pa Code Chapter 6400 is defined as: a vacancy that occurs when an individual enrolled in the
Consolidated Waiver or a base funded individual enrolled with ODP is not expected to return to a licensed 6400 residential habilitation waiver service location due to death, moving out of state, permanent placement in a nursing facility, or when the individual voluntarily chooses to disenroll from the Consolidated Waiver.

A permanent vacancy in a waiver service location licensed under 55 Pa Code 3800 and 5310 is defined as: a vacancy that occurs when an individual enrolled in the Consolidated Waiver or a base-funded individual enrolled with ODP is not expected to return to a licensed 3800 or 5310 residential habilitation waiver service location due to death, moving out of state, permanent placement in a nursing facility, or when the individual voluntarily chooses to disenroll from the Consolidated Waiver.

**Bed Reservation for (Medical and Therapeutic Leave):**

Effective November 15, 2011 payments to licensed (55 Pa Code Chapters 6400, 6500, 3800, 5310) and unlicensed residential habilitation providers will be paid for therapeutic and medical leave days up to a combined maximum of 60 days per individual per fiscal year. Any medical or therapeutic leave days that occurred for an individual from July 1, 2011 through November 14, 2011 will not count toward the new combined 60 day fiscal year limit that is effective November 15, 2011.

**Permanent Vacancy:**

Effective November 15, 2011, ODP will provide payments to licensed (55 Pa Code 6400, 3800, 5310) residential habilitation service providers up to a maximum of 30 days per individual per fiscal year for a permanent vacancy that occurs in the licensed residential waiver service location. The permanent vacancy must have been created by an individual enrolled in the Consolidated Waiver or an individual with intellectual disabilities receiving licensed residential habilitation services in a waiver service location, but using base funding. Any permanent vacancy days for an individual that occurred from July 1, 2011 through November 14, 2011 will not count toward the 30 day limit that is effective November 15, 2011.

Providers of licensed 6400 residential habilitation services providing services in a Consolidated Waiver service location shall notify ODP and the Administrative Entity when a vacancy occurs. ODP must approve payment for permanent vacancies created by an individual enrolled in the Consolidated Waiver. All permanent vacancy requests created by an individual enrolled in the Consolidated Waiver continue to require prior authorization by ODP using the Provider Vacancy Management Notification Form (DP#1024 or any approved revisions). For ODP enrolled base funded individuals, the County Program will determine the status of the vacancy.

In licensed waiver residential habilitation service locations under 55 Pa Code 3800 and 5310, the permanent vacancy for the Consolidated Waiver individual must be approved by ODP retrospectively and only if the vacancy is filled by another Consolidated Waiver participant. The payment for the permanent vacancy will apply only to the service location in which the permanent vacancy occurred unless in compliance with the exception outlined below. For base funded individuals paid by the County Program, the County Program will determine the status of the vacancy.
ODP will not pay for any permanent vacancy to a 6400, 3800 or 5310 licensed residential habilitation provider when:

- The licensed provider uses the permanent vacancy for an alternative purpose such as, respite
- The licensed provider does not cooperate with the placement process (for example, refusing to consider all referrals, and delaying the process).
- There is a planned move from a licensed residential habilitation waiver service location operated by one provider agency to a licensed residential habilitation waiver service location operated by another provider agency.

If the permanent vacancy results in NO individual funded by ODP living at the service location, ODP will not pay the licensed residential habilitation service eligible rate for the vacancy. For example, if a permanent vacancy occurs in a one person home, or if multiple vacancies occur in a multiple person home, and it results in no one residing in the home, the vacancy(s) will not be paid.

ODP has the option to recoup any funded permanent vacancies after the fact if:

- A licensing action is taken against a residential habilitation provider of a (6400, 3800, and 5310) waiver service location as a result of founded abuse or neglect by the provider agency.
- The residential habilitation provider has a provisional licensing status (6400).
- A provider’s license in a (6400, 3800, and 5310) residential habilitation service location has been revoked and the provider agency files an appeal.
- An incident of founded neglect in a 6400, 3800, and 5310 residential habilitation waiver service location results in an Act 28 notification to the local District Attorney or Attorney General when applicable to determine if the neglect is a criminal offense in accordance with the Act.
- The provider of the 6400, 3800 and 5310 residential habilitation service has any Medical Assistance restrictions.

For planned moves for individuals in the Consolidated Waiver in a 6400 residential habilitation waiver service location:

- The current licensed 6400 Residential Habilitation provider is responsible to initiate the process to fill the vacancy immediately upon notification or recognition of an impending permanent vacancy.
- ODP will allow movement of individuals enrolled in the Consolidated Waiver to a different 6400 licensed residential habilitation service location within the same provider agency when a permanent vacancy exists at one of the provider’s other 6400 licensed residential habilitation waiver service locations that would better meet the needs of a Consolidated Waiver individual.
- When a permanent vacancy exists in a 6400 residential habilitation waiver service location, the provider may use the approved 30 calendar day time period to move individuals internally in order to better accommodate the individuals’ changing needs. Only the initial 30 calendar day time period will be approved as a permanent vacancy regardless of the number of individuals moved within the provider agency’s site locations.
• The changing need of the individuals who will be moved must be reflected in each individual's ISP.
• The residential habilitation provider agency will designate that it plans to make internal moves on the Provider Vacancy Management Notification Form (DP # 1024) by checking the appropriate block on the form.
• A plan is required to be attached to the Provider Vacancy Management Notification Form (DP # 1024) with details of the movement. In no event will the movement between a provider agency's site locations alter the approved program capacity at any 6400 residential habilitation service location unless requested by the provider and approved by ODP.
• The residential habilitation provider agency must communicate the site location of the final remaining vacancy to the Regional Waiver Capacity Manager (WCM) within 5 calendar days from when the WCM received the DP# 1024.

OBSELETE DOCUMENTS (Effective November 15, 2011):

Informational Packet #037-10: "Request for an Exception to the Established 48 Calendar Day Limit for Payment of Residential Habilitation Therapeutic Leave Days, including Form DP 1028"

Informational Packet # 007-09: "Payment through treasury for Direct Service Providers"


Dear Colleague letter dated October 22, 2008 policy on residential habilitation effective July 1, 2009

Informational Memo # 001-09: “Bed Reservation Days"