

# Informational Packet

## Provider Vacancy Management Process and Form

ODP Communication Number: Packet 085-10

**Audience:** Administrative Entities, Supports Coordination Organizations, and Waiver Funded Residential Habilitation Providers.

**Purpose:** The purpose of this Informational Packet is to announce and issue the final version of the **Provider Vacancy Management Notification Form** (now DP 1024) as well as to distribute the **Vacancy Management Process** and the **Process for Payment of an Approved Permanent Vacancy**—for use when there are plans for the movement of individuals between the provider's existing residential service locations.

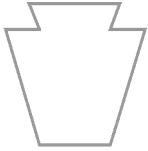
Please note that Informational Packet 085-10 replaces the information previously communicated in Informational Packet 007-09 which is now obsolete.

This Informational Packet contains 3 separate attachments to use in order to request approval and payment for a permanent vacancy. The attachments include:

- The **Vacancy Management Process** (*Attachment #1*) describes the process to report, fill, and request payment for permanent vacancies
- The **Process for Payment of an Approved Permanent Vacancy** (*Attachment #2*) for use when there are plans for the movement of individuals between the provider's existing residential service locations
- The **Provider Vacancy Management Notification Form DP 1024** revised 5/10 (*Attachment #3*)

Please Note--The information entered on form DP 1024 will not be saved. If completing form DP 1024 electronically, please be sure to print the form prior to closing the document. The form can then be faxed or scanned and emailed to the appropriate AE or Regional Waiver Capacity Manager.

Form DP 1024 can be downloaded from the OCS website at [www.odpconsulting.net](http://www.odpconsulting.net). The link to the form can be found by selecting *ODP Forms* from the left sidebar under the *ODP Resources* menu box.



## Vacancy Management Process

---

The Office of Developmental Programs (ODP) has begun vacancy management effective July 1, 2009.

There are two components to vacancy management.

- The first is supporting the activities necessary to fill any vacancy in a licensed 6400 community home as soon as possible after the vacancy occurs.
- The second is to fund permanent vacancies, as defined by ODP, for up to sixty days.

A permanent vacancy occurs when an individual is not expected to return to a licensed 55 PA Code Chapter 6400 Community home site. The provider, SCO, AE and Regional ODP all have roles in the process of filling these vacancies. The Department of Public Welfare (DPW) will fund a permanent vacancy when the individual is dis-enrolled from the consolidated waiver due to death, movement out of the state of Pennsylvania, permanent placement in a nursing facility or when he or she voluntarily chooses to leave service and is no longer eligible for and has been dis-enrolled from the Consolidated waiver. Payment for a permanent vacancy will apply only to the service location where the permanent vacancy occurs.

DPW will also fund a permanent vacancy in a residential setting licensed under 55 PA Code Chapter 3800 or Chapter 5310 only with ODP approval when the vacancy was created by an individual who was dis-enrolled from the consolidated waiver and filled by another individual who is enrolled in the consolidated waiver.

These are the procedures to be followed by Providers, Administrative Entities (AE), and Supports Coordination Organizations (SCO) until bulletins are finalized and distributed.

The process to be followed to fill a permanent vacancy is:

1. Providers will submit the **Provider Vacancy Management Notification Form DP 1024** (*Attachment #3*) revised on 5/10 to the AE of registration for the individual who created the permanent vacancy and to the appropriate ODP regional office as soon as they become aware of a possible vacancy.
2. The AE, where the individual that created the vacancy was registered, is required to notify the regional Waiver Capacity Manager (WCM) within five calendar days if they have an individual identified to fill the vacancy.
  - a. If the initial AE does have an individual identified as likely to be appropriate for the vacancy, the AE, SCO and Provider will move towards filling the vacancy. This will include ensuring: that the individual is eligible and enrolled in the consolidated waiver, that the Individual Support Plan

(ISP) is developed or revised accordingly, and that the transition activities needed to ensure a successful placement occur within the sixty days while payment is being made to the provider for the vacancy.

- b. If the initial AE does not have an individual identified as likely to be appropriate for the vacancy, the regional WCM will notify other AEs of the availability of the vacancy and will support the activities needed to fill the vacancy.
3. The AE will provide progress updates to the regional WCM. If the activities are not being undertaken in a timely manner to ensure the vacancy will be filled within the sixty days, the regional WCM may notify the AE that the capacity at that site will be offered to other AEs who may have an individual who would benefit from placement at that location.

The process to be followed to request payment for an eligible permanent vacancy is:

1. If the provider is requesting payment for a permanent vacancy that meets the criteria established by ODP, the **Provider Vacancy Management Notification Form DP 1024** (*Attachment #3*) must be submitted to the AE and ODP regional office within one business day of the vacancy occurring. The box requesting approval for payment must be checked on Form DP 1024.
2. The regional WCM will process the payment request and will notify the provider in writing if the request is approved or disapproved.
3. Notification of approval will include the authorization number (to be used by the provider when submitting claims through PROMISE<sup>TM</sup>), instructions for billing, and the dates the authorization will be valid.
4. If a provider utilizes the permanent vacancy for temporary respite while the authorization for payment is in effect, the provider must notify the regional WCM who will suspend the authorization while the provider is billing for the respite services. Once the respite services are discontinued, the payment for the permanent vacancy will be reauthorized.
5. Payment for the permanent vacancy will not exceed a total of sixty days unless the regional WCM extends that time when an individual has been identified and the activities for that individual to obtain placement in the service location cannot be completed in time.

Please note that once the provider fills the vacancy with a new admission to the program, the Permanent Vacancy authorization will be end-dated even if the vacancy is filled before 60 days. This does not apply to situations where the Permanent Vacancy is filled as a result of internal moves.



## Process for Payment of an Approved Permanent Vacancy (When there are Plans for the Movement of Individuals between the Provider's Existing Residential Service Locations)

---

In addition to the process for requesting payment of a Permanent Vacancy, ODP has developed a process and defined conditions under which a provider may receive a maximum of 60 days payment for a permanent vacancy when there are internal moves, between or among other community homes operated by the agency, that result in the use of the initial vacancy for another waiver participant. If a provider indicates that an approved permanent vacancy is expected to be used for an internal move(s), because another waiver participant currently receiving residential services from that provider can be better served in the service location where the permanent vacancy exists, the following must occur:

1. The provider must, complete the Provider Vacancy Management Notification Form DP 1024 (revised 05/10) and indicate that they intend to make internal moves between or among residential service locations that will result in a change where the vacancy will be available.

The designation shall be made by checking the appropriate box on the Vacancy Management Notification Form.

2. Submission of a plan is required when a provider expects to use the permanent vacancy to support internal move(s) of another waiver participant that they currently serve residentially. This plan must be submitted by the provider to the AE using the Provider Vacancy Management Notification Form. The plan shall include the following information:

- Name(s) of the individual expected to move,
- If multiple AEs are involved, please specify.
- Reason for the planned move,
- Affected service location(s),
- Projected move date(s), and
- Service location where the vacancy resulting from the move(s) will be located.

In no event may this plan alter the approved program capacity at any service location unless requested and approved by ODP.

3. If payment for a permanent vacancy is approved by ODP and the provider indicates there is a plan for internal moves to occur, a maximum of 60 days of reimbursement will be provided. Payment will occur at the service location where the permanent vacancy occurred, through the submission of claims to PROMISE™ using the prior authorization number and instructions issued by ODP. ODP will *not* grant an extension to the 60 day time limit under these circumstances.

4. The provider will provide progress updates to the appropriate AE waiver capacity manager, including the status of team meetings and any issues encountered in implementing the proposed plan. The provider must also notify the regional waiver capacity manager of *any* change to the plan that affects the people projected to move and/or service location(s) involved. The provider shall provide written confirmation of such changes to ODP, with a copy to the AE, by attaching the movement plan as referenced on the Vacancy Management Notification Form. When appropriate the movement plan shall include an explanation of why the initial plan has been modified/changed.



**pennsylvania**

DEPARTMENT OF PUBLIC WELFARE

www.dpw.state.pa.us

## Provider Vacancy Management Notification Form

DP 1024 replaces all other  
Vacancy Mgmt Notification Forms issued by ODP

Legal Entity Name
Street Address
City/State/Zip
Phone (include area code)

<b>MPI #:</b>	<b>Approved Program Capacity:</b>
<b>Site Location Code:</b>	<b>Licensed Capacity:</b>
Residential Site Name	Residential Site Street Address
Residential Site City/State/Zip	

<b>Responsible AE:</b>
<b>Date of Vacancy (mm/dd/yyyy):</b>
<b>Vacancy Reason:</b> <input type="checkbox"/> Death (eligible for payment) <input type="checkbox"/> Moving out of Pennsylvania (eligible for payment) <input type="checkbox"/> Permanent Placement in Alternative setting (eligible for placement) <input type="checkbox"/> Moved to another residential habilitation site, but still enrolled in Waiver (ineligible for payment)

<b>Name of Individual:</b>	<b>MCI #:</b>
<b>County of Registration:</b>	<b>Waiver Status</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Waiver Status at Request</b> <input type="checkbox"/> Enrolled <input type="checkbox"/> Disenrolled	

<b>Submitted By:</b>	<b>Provider Name:</b>
<b>Contact Person:</b>	<b>Phone (include area code):</b>
<b>E-Mail Address:</b>	

<b>Payment being requested for permanent vacancy?*</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
If checked yes: Do you intend to use this permanent vacancy to make internal moves between and among waiver funded community homes to better meet the needs of an individual(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No
If internal moves are planned, attach the movement plan (include name of the individual(s) expected to move, reason(s) for the planned move, affected service location(s), projected move date(s) and service location where the vacancy resulting from the moves will be located.)

<b>Effective Date of Vacancy (mm/dd/yyyy):</b>	<b>Date of Request (mm/dd/yyyy):</b>
--	--------------------------------------

Signature of Regional Waiver Capacity Manager	Date (mm/dd/yyyy)
---	-------------------

\* The Provider will receive an official notification by letter indicating approval or disapproval of this request.