

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Developmental Services and MassHealth's
Office of Long-Term Services and Supports



**Day Habilitation Supplement Transition to
Individualized Staffing Supports
Provider FAQs**



June 24, 2022

Background:

Day Habilitation (DH) is a community-based, non-residential Medicaid state plan service for MassHealth members with an intellectual disability (ID) or a developmental disability (DD). The design meets the assessed health, daily living, skilled nursing, and/or therapeutic needs of members' cognitive, physical, complex medical, and/or behavioral health impairments. Members participate in programming based on a day habilitation service plan (DHSP) guided by member-driven goals and objectives to reach optimal physical, cognitive, psychosocial, occupational capabilities, and wellness. Certain members may need supplemental services in the form of additional one-to-one staff assistance, above and beyond what is delivered through the DH service, in order to participate in a DH program.

The Department of Developmental Services (DDS) currently authorizes and funds the one-to-one staff assistance, called DH Supplement, to supply additional staffing supports for MassHealth members who require additional support in their DH program. This service has been available mainly for participants in the MassHealth Home and Community Based Services waivers for adults with ID/DD. DDS has also provided funding to DH providers for some individuals who are not waiver eligible to receive DH Supplement.

What is changing:

MassHealth and DDS are working collaboratively to transition the DH Supplement service, renamed Individualized Staffing Supports (ISS), from the MassHealth Home and Community Based Services waivers for adults with ID/DD and incorporate it into the Medicaid state plan, effective 10/1/22. This will streamline and modernize the rate structure of the DH state plan service to include ISS. ISS allows individuals with substantial clinical needs to access and benefit from DH services. MassHealth will institute a Prior Authorization (PA) process to determine medical necessity for ISS. More information regarding the PA process will be forthcoming.

Reason to make this change:

Incorporating this one-on-one staff assistance into the state plan service as ISS will provide a more streamlined and structured service for members and DH providers. The updated process will also make the service easier to access and administer and will make the service available to all eligible MassHealth recipients, not only those enrolled in one of the DDS Adult ID waivers.

Day Habilitation Provider FAQs:

1. Will all DH providers be required to provide ISS?

Yes. ISS will be included in MassHealth's DH program and rate regulations as a service



level and DH providers must be prepared to accept members who require ISS or be able to tailor service delivery to an existing member who may develop a need for ISS in the future.

2. *Are DH rates changing with the inclusion of ISS?*

Not at this time. MassHealth is in the process of adding ISS codes and rates to the MassHealth DH rate regulation. The ISS rates will mirror the DH Supplement DDS rate regulation 101 CMR 424.00 and as of 10/1/22, the only change will be to the billing code(s). The rates for ISS will not change. Although the codes/rates will be posted in the DH rate regulation for 7/1/22, new ISS rates will not be effective until 10/1/22.

3. *101 CMR 424.000 billing rates are 15-minute units, not per diem. Will that change?*

No. MassHealth will continue to authorize ISS in 15-minute units.

4. *What process do DH Supplement providers need to complete to become ISS providers?*

No separate process is required. The organization needs to be an enrolled DH provider with MassHealth and must comply with the provider participation requirements in 130 CMR 419.400 and 450.000.

5. *Will ISS providers that previously provided DH Supplement retain their clients?*

Yes. The transition from DDS funded DH Supplement to MassHealth ISS will have no effect on current DH Supplement recipients. MassHealth will establish an administrative PA for up to 2 years to ensure those individuals who currently receive DH Supplement will continue to receive the same level of service through this transition.

6. *What if an individual does not have MassHealth and DDS funds their DH and/or DH Supplement?*

DDS provider agencies will continue to contract with DDS for these individuals using the same activity codes (3664 Day Habilitation and 3285 Day Habilitation Supplement). DDS will be updating the name of the 3285 activity code to ISS. Neither 3664 DH nor 3285 DH Supplement/ISS will be waiver reimbursable.

7. *Can ISS be used to enhance overall staffing at the DH provider site?*

No. ISS must be tied to an individual member's assessed need. It cannot be used for enhanced staffing generally. Providers will need to show that an individual member requires increased staffing supports in addition to the regular DH staffing.

8. *What if an attendee is absent, can a DH provider use ISS hours to support someone else?*

No. The PA for ISS must be attached to a specific member. Billing for ISS must be for the identified member.

9. *Will ISS only be authorized for 30 hours per week, or can it be authorized for 10 hours per week if that is what the member needs?*

ISS may be authorized for less than 30 hours per week. ISS hours are authorized only as medically necessary to a particular member.

10. *If an individual is authorized for 10 hours per week of ISS, can the DH provider bill for 6 hours one day and 3 the next, or does it need to be a consistent number of hours per day?*

Providers must bill for the actual units of ISS delivered to a member in a day. The hours of service do not need to be consistent across the days of the week, provided that it does not exceed the total amount of hours authorized.

11. How will MassHealth expect services provided under ISS to be documented?

As with any service, documentation is necessary to prove that a service was delivered. Additional guidance from MassHealth on requirements related to documentation will be forthcoming.

12. Will the staff who provide ISS count towards staffing ratios?

No. A DH provider can't have a staff person who is attached to an individual ISS recipient count toward the overall staffing ratio during the time that staff person is providing ISS.

13. What if a staff person who is providing ISS calls in sick, does the DH provider need to instruct the ISS recipient not to attend that day?

ISS must still be provided to that member. Providers must have the ability to deliver the service if it is authorized. The PA is tied to the service level, not to an individual staff member. If ISS was not provided, providers may not bill for it. Providers must use their own clinical judgment to determine whether the site can safely administer services, even if the ISS staff person is unavailable.

14. If a DH provider has an individual who is new to the site and who requires ISS on the member's first day, how can that service be authorized?

MassHealth is establishing an "interim administrative PA" process for up to 60 calendar days, to give the DH provider authority to provide initial services and adequate time to submit the initial PA request.

15. What if a member loses their MassHealth coverage and their claim is denied?

Providers should check member eligibility daily. If a provider bills MassHealth for the service and the claim gets denied because the member's coverage has lapsed, the provider should work with the member to get reinstated if possible. Once a final decision is received from MassHealth and it is clear that reinstatement is not possible in a timeframe that reimburses the provider, the provider should contact the DDS Area Office to discuss options.

16. For individuals who are One Care or Senior Care Options (SCO) plan members, how will ISS be reimbursed?

One Care and SCO plans will be authorizing the service just as they currently authorize DH services. However, One Care and SCO rates are negotiated by the plans and are not necessarily the same rates as MassHealth ISS.

Questions?

If providers have additional questions that were not answered via this FAQ document, providers can email Karen Seck or Danielle Sheehan at Karen.L.Seck@mass.gov or Danielle.Sheehan@mass.gov

Families will be receiving a letter from DDS and MassHealth, explaining this change and what it means. If families have questions that are not answered by the letter or FAQ, the questions should be directed to their DDS Service Coordinators

If families require support in understanding this information that provider agencies cannot meet (such as language translation), please notify Liz Sandblom at elizabeth.sandblom@mass.gov.