Informational Memo
Base Funded Respite Services Additional Information

ODP Communication Number: Memo 038-10

AUDIENCE: Administrative Entities (AE), Supports Coordination Organizations, Direct Service Providers and Other Interested Parties

PURPOSE: This Office of Developmental Programs (ODP) Informational Memo is intended to provide additional information regarding the use of the Base-Funded procedure codes during the ISP planning process for Fiscal Year (FY) 2009-2010 and FY 2010-2011. Please note the three areas identified below.

#1 Base-Funded Respite and Waiver-Funded Respite Services have separate procedure codes:

ODP has separate procedure codes to distinguish between Base-Funded Respite Services and Waiver-Funded Respite Services. The current regulations, 55 Pa. Code §6350 Family Resource Services, outlines the provision of Base-Funded Respite Care and Family Aid. The Service Definitions Narrative for the Consolidated and Person/Family Directed Support (P/FDS) Waivers (Bulletin # 00-08-17) outlines the policy surrounding the provision of Waiver-Funded Respite Services. Separate procedure codes for Base-Funded Respite Services and Waiver-Funded Respite Services are needed because the unit limitations are different.

ODP recognizes that the Service Definition Chart was not consistent with the Service Definition Narrative and apologizes for this inconsistency. This inconsistency has been eliminated from the final version of the 2010-2011 Service Definition Bulletin.

All ISPs that contain a Waiver-Funded Respite procedure code when the individual’s program enrollment is Base must be corrected to the Base-Funded Respite procedure code. As a reminder, claims submitted by providers for a procedure code that does not correspond to the correct waiver/program enrollment (Base, P/FDS or Consolidated) will deny in PROMIS².

#2 For Base, the Waiver-Funded Respite-Camp procedure codes are allowable for FY 2009-2010:

For FY 2009-2010, Waiver-Funded Respite-Camp, 24 hours (procedure code W7285) and Waiver-Funded Respite Camp, 15 minutes (procedure code W7286) are allowable under both the base
and waiver program enrollment options. These procedure codes do not need to be changed for FY 2009-2010.

Starting with FY 2010-2011, the Waiver-Funded Respite-Camp procedure codes (W7285 and W7286) will no longer be available to be authorized using Base Funding. ODP recommends that Recreation/Leisure Time Activities (procedure code W7316) or FSS Individual Payment (W7320) be used as an alternative for the Waiver-Funded Respite Camp procedure codes when an individual's enrollment is listed as Base. Please be mindful of the change when preparing FY Renewal ISPs for 2010-2011.

#3 Base-Funded Respite 15 min procedure codes will be replaced by Family Aide for FY 2010-2011:

Effective July 1, 2010, the Base-Funded Respite 15 minute procedure codes (W7301, W7302, W7304, W7222, W7223, and W7224) will no longer be available. In an effort to prepare for Fiscal Year 2010-2011 Renewal ISPs and a change to the service definitions for 2010-2011, ODP is recommending that the Family Aide procedure codes (W7310, W7311, W7312, W7314, W7324, W7325, and W7326) be used as an alternative to the Base-Funded Respite 15-min procedure codes. Please be mindful of the change when preparing FY Renewal ISPs for 2010-2011. A more comprehensive communication containing all the changes for FY 2010-2011 in order to prepare the FY renewal ISPs will be forthcoming.

Corrective Actions for 2009-2010 ISPs:

ODP’s regional offices will provide each AE with a listing of the ISPs with a program enrollment listed as Base and have a Waiver-Funded Respite procedure code (other than Respite-Camp) included on their plan. ODP is asking AEs to assist in correcting these ISPs for FY 2009-2010 and to be mindful of these changes for future Fiscal Year Renewal ISPs.

In order to correct this issue, the following steps should be taken:
1. A critical revision draft ISP should be created.
2. All Waiver-Funded Respite procedure codes should be removed from the ISP.
3. If necessary, AEs should work with Providers to assist them with updating their Service Offerings in Provider Access so that the correct procedure codes by provider type and specialty code combination can be added to the ISP. Please refer to chart below for a listing of Provider Types and Specialty Codes.
4. The appropriate, Base Funded Respite or Family Aid procedure codes should be added to the ISP to replace the Waiver-Funded Respite procedure codes.
5. The AE will approve the ISP and authorize the procedure codes using the correct funding source.
6. The AE should follow-up with the Provider to let them know that the ISP has been updated and ask them to review their Service Authorization Notice.
7. The Provider should now be able to bill/re-bill for services rendered.

Effective July 1, 2010, HCSIS will verify that the procedure codes are allowable depending on the program enrollment of the individual when being authorized by the AE. An error message will be displayed for situations where the program enrollment does not match the procedure codes.
The following crosswalk outlines the Waiver-Funded Respite Services that should be replaced by a Base-Funded Services for those with a program/waiver enrollment of Base Services.

<table>
<thead>
<tr>
<th>Incorrect Waiver-Funded Service Name for Base Enrollment</th>
<th>Correct Base-Funded Service Name and Supporting Regulation for Base Enrollment</th>
<th>Provider Type and Specialty Combination</th>
<th>Correct Base-Funded Procedure Codes</th>
<th>Base-Funded Limits</th>
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</table>
| Waiver-Funded Respite, 24 hour (In-home and Out-of-home) | Base-Funded Respite, 24 hour  
55 Pa.Code § 6350.21 | Provider Type: 51 Home and Community Habilitation  
**Specialty Code:** 513 Respite Care  
OR  
Provider Type: 03 Extended Care  
**Specialty Code:** 036 Respite Care | W7287  
W7288  
W7290  
W7099  
W7100  
W7101 | • Respite services provided for 24 hours  
• Limited to 28 days per FY  
• Must have ODP Regional Approval to exceed limit |
| Waiver Funded Respite, 15 min (In-home and Out-of-home) | Base-Funded Respite, 15 min  
2009-2010 Service Definitions | Provider Type: 51 Home and Community Habilitation / Respite Care  
**Specialty Code:** 513 Respite Care | W7301  
W7302  
W7304  
W7222  
W7223  
W7224 | • Relief lasting less than 16 hours or less per segment  
• Can be used until 6/30/2010. |
| Family Aide | 55 Pa.Code § 6350.22 | Provider Type: 51 Home and Community Habilitation  
**Specialty Code:** 519 Attendant Care  
OR  
Provider Type: 51 Home and Community Habilitation  
**Specialty Code:** 362 (FSS/Consumer Payment) | W7310  
W7311  
W7312  
W7314  
W7324  
W7325  
W7326 | • Relief lasting less than 24 hours in a calendar day  
• Limited to 4 sessions per month  
• County MH/MR Office may give approval to exceed the session limit. |