DATE:       June 28, 2019

TO:         Interested Parties

FROM:       Michelle Probert, Director, Office of MaineCare Services

SUBJECT:    Final Adoption Major Substantive Rule: 10-144 C.M.R. ch. 101, MaineCare Benefits Manual, Chapter III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder

This letter gives notice of the final adoption of major substantive rule: 10-144 C.M.R. ch. 101, MaineCare Benefits Manual, Chapter III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder.


In creating the reimbursement rates for the procedure codes shown below, the Department examined utilization of these services, and then calculated rates to ensure parity between Section 29 and MBM Chapter III, Section 21, Allowance for Home and Community Benefits for Adults with Intellectual Disabilities, to lessen administrative complications for providers.

The Department submitted provisionally-adopted MBM Chapter III, Section 29, to the Legislature pursuant to 5 M.R.S. § 8072. During the legislative review of the provisionally adopted major substantive rule, the Legislature passed as an emergency measure Resolves 2019, ch. 17, Resolve, Regarding Legislation Review of Portions of Chapter 101: MaineCare Benefits Manual, Chapter III, Section 29: Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder, a Major Substantive Rule of the Department of Health and Human Services, authorizing final adoption of the provisionally adopted major substantive rule only if the following emergency change is made: The rule must be amended in Appendix I to increase the rate for procedure code T2017 QC from $1.63 per ¼ hour to $2.00 per ¼ hour. The Department has amended the rule accordingly for final adoption. Governor Mills approved Resolves 2019, ch. 17 on April 30, 2019, and the measure became effective immediately pursuant to its emergency clause.
The Department finally adopts the following major substantive rule changes to Chapter III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder:

- In Appendix I, the following rates have been increased:
  - S5140 Shared Living (Foster Care, adult)-Shared Living Model-One member served
  - S5140 UN Shared Living (Foster Care, adult)-Shared Living Model-Two members served
  - T2017 Home Support-Quarter Hour
  - T2017 GT Home Support-Remote Support-Interactive Support
  - T2021 Community Support (Day Habilitation)
  - T2021 SC Community Support (Day Habilitation) with Medical Add-On
  - T2019 Employment Specialist Services (Habilitation, Supported Employment waiver)
  - T2019 SC Employment Specialist Services (Habilitation, Supported Employment waiver) with Medical Add-On
  - H2023 Work Support (Supported Employment)-Individual
  - H2023 SC Work Support (Supported Employment)-Individual with Medical Add-On
  - H2023 UN Work Support (Supported Employment)-Group 2 members served
  - H2023 UP Work Support (Supported Employment)-Group 3 members served
  - H2023 UQ Work Support (Supported Employment)-Group 4 members served
  - H2023 UR Work Support (Supported Employment)-Group 5 members served
  - H2023 US Work Support (Supported Employment)-Group 6 members served
  - T2015 Career Planning (Habilitation, prevocational)
  - S5150 Respite Services-1/4 hour
  - S5151 Respite Services-Per Diem

- In Section 1400, the maximum amount that can be billed in a single day for Respite has been increased (to reflect the rate increases made in Appendix I).

- In Section 1810, the group rates for Work Support have been increased (to reflect the rate increases made in Appendix I).

The emergency major substantive rule changes, effective September 12, 2018, shall remain in effect until the time that these finally adopted rules take effect, thirty days after filing with the Secretary of State’s Office. 5 M.R.S. § 8072(8).

Rules and related rulemaking documents may be reviewed at, or printed from, the Office of MaineCare Services website at [http://www.maine.gov/dhhs/oms/rules/index.shtml](http://www.maine.gov/dhhs/oms/rules/index.shtml) or for a fee, interested parties may request a paper copy of rules by calling (207) 624-4050 or call Maine Relay at 711.

A concise summary of the adopted rule is provided in the Notice of Agency Rulemaking Adoption, which can be found at [http://www.maine.gov/sos/cec/rules/notices.html](http://www.maine.gov/sos/cec/rules/notices.html). This notice also provides information regarding the rulemaking process.
Notice of Agency Rule-making Final Adoption

AGENCY: Department of Health and Human Services, Office of MaineCare Services

CHAPTER NUMBER AND TITLE: 10-144 C.M.R. ch. 101, MaineCare Benefits Manual, Chapter III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder.

ADOPTED RULE NUMBER:

CONCISE SUMMARY: The Department of Health and Human Services (“the Department”) finally adopts these major substantive rule changes to Ch. III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder to effectuate increased reimbursement rates for 18 procedure codes and services pursuant to P.L. 2017, ch. 459, An Act Making Certain Supplemental Appropriations and Allocations and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government, and to implement an increase for procedure code T2017 QC in conformance with Resolves 2019, ch. 17.


In creating the reimbursement rates for the procedure codes shown below in conformance with P.L. 2017, ch. 459., the Department examined utilization of these services, and then calculated rates to ensure parity between Section 29 and MBM Chapter III, Section 21, Allowances for Home and Community Benefits for Adults with Intellectual Disabilities, to lessen administrative complications for providers.

During the Legislative review of the provisionally adopted major substantive rule, the Legislature passed as an emergency measure Resolves 2019, ch. 17, Resolve, Regarding Legislation Review of Portions of Chapter 101: MaineCare Benefits Manual, Chapter III, Section 29: Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder, a Major Substantive Rule of the Department of Health and Human Services, authorizing final adoption of the provisionally adopted major substantive rule only if the following emergency change is made: The rule must be amended in Appendix I to increase the rate for procedure code T2017 QC from $1.63 per ¼ hour to $2.00 per ¼ hour. The Department has amended the rule accordingly.

The Department finally adopts the following major substantive rule changes to Chapter III, Section 29, Allowances for Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder:

- In Appendix I, the following rates have been increased:
  - S5140 Shared Living (Foster Care, adult)-Shared Living Model-One member served
  - S5140 UN Shared Living (Foster Care, adult)-Shared Living Model-Two members served
  - T2017 Home Support-Quarter Hour
  - T2017 GT Home Support-Remote Support-Interactive Support
  - T2021 Community Support (Day Habilitation)
  - T2021 SC Community Support (Day Habilitation) with Medical Add-On
T2019 Employment Specialist Services (Habilitation, Supported Employment waiver)
T2019 SC Employment Specialist Services (Habilitation, Supported Employment waiver) with Medical Add-On
H2023 Work Support (Supported Employment)-Individual
H2023 SC Work Support (Supported Employment)-Individual with Medical Add-On
H2023 UN Work Support (Supported Employment)-Group 2 members served
H2023 UP Work Support (Supported Employment)-Group 3 members served
H2023 UQ Work Support (Supported Employment)-Group 4 members served
H2023 UR Work Support (Supported Employment)-Group 5 members served
H2023 US Work Support (Supported Employment)-Group 6 members served
T2015 Career Planning (Habilitation, prevocational)
S5150 Respite Services-1/4 hour
S5151 Respite Services-Per Diem

- In Section 1400, the maximum amount that can be billed in a single day for Respite has been increased (to reflect the rate increases made in Appendix I).
- In Section 1810, the group rates for Work Support have been increased (to reflect the rate increases made in Appendix I).

The Maine State Legislature authorized final adoption of the rule. Resolves 2019, ch. 17, was signed by Governor Mills and immediately took effect on April 30, 2019.

The final adopted rule makes the permanent changes to this rule as required by the Legislature. This final major substantive rule shall become effective thirty days after filing with the Secretary of State’s Office. 5 M.R.S. § 8072(8).


EFFECTIVE DATE: July 28, 2019

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TTY users call Maine relay 711
SECTION 29  ALLOWANCES FOR SUPPORT SERVICES FOR ADULTS WITH INTELLECTUAL DISABILITIES OR AUTISM SPECTRUM DISORDER

MAJOR SUBSTANTIVE RULE

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GENERAL PROVISIONS

1000 PURPOSE

The purpose of these regulations is to describe the reimbursement methodology for Home and Community Based Services waiver providers whose services are reimbursed in accordance with Chapters II and III, Section 29, Support Services for Adults with Intellectual Disabilities or Autism Spectrum Disorder of the MaineCare Benefits Manual. All services reimbursed in this section are considered fee for service.

1100 DEFINITIONS

Fee-for-service - is a method of paying providers for covered services rendered to members. Under this fee-for-service system, the provider is paid for each discrete service described in Appendix I to a member.

Per Diem - A day is defined as beginning at midnight and ending twenty-four (24) hours later.

Week – A week is equal to seven consecutive days starting with the same day of the week as the provider’s payroll records, usually Sunday through Saturday.

Year - Services are authorized based on the state fiscal year, July 1 through June 30.

1200 AUTHORITY

The authority of the Department to accept and administer any funds that may be available from private, local, State or Federal sources for services under this Chapter is established in 22 M.R.S.A.§3173. The authority of the Department to adopt rules to implement this Chapter is established under 22 M.R.S. §§ 42(l) and 3173.

1300 COVERED SERVICES – Covered Services are defined in Chapter II, Section 29 of the MaineCare Benefits Manual.

1400 REIMBURSEMENT METHODS

Services covered under this section will be reimbursed on a fee-for-service basis using one of these methods as follows:

1. **Standard Unit rate** – A Standard unit rate is the rate paid per unit of time (an hour, a specified portion of an hour, or a day) for a specific service. Services in the standard rate include:

   A. Assistive Technology-Assessment;
1400 **REIMBURSEMENT METHODS** (cont.)

B. Assistive Technology-Transmission (Utility Services);
C. Career Planning;
D. Community Support Services;
E. Employment Specialist Services;
F. Home Support-Quarter Hour:
G. Home Support-Remote Support-Interactive Support;
H. Home Support-Remote Support-Monitor Only;
I. Respite, ¼ hour and per diem;
J. Shared Living;
K. Work Support-Individual;
L. Work Support-Group.

2. **Prior Approved Price** – DHHS will determine the amount of reimbursement for Home Accessibility Adaptations or Assistive Technology-Devices after reviewing a minimum of two written itemized bids from different vendors submitted by the provider, prior to providing services. The written itemized bids must contain cost of labor and materials, including subcontractor amounts. DHHS will issue an authorization for the approved amount based on the written bids to the provider.

3. **Respite** - Reimbursement for Respite is a quarter hour billing code. After 33-quarter hour units of consecutive Respite Services, the provider must bill using the per diem billing code. The quarter hour Respite amount billed any single day cannot exceed the Respite per diem rate of $110.21.

1500 **REQUIREMENTS FOR PARTICIPATION IN MAINECARE PROGRAM**

Providers must comply with all requirements as outlined in Chapter 1, General Administrative Policies and Procedures and Chapter II, Section 29 of the *MaineCare Benefits Manual*.

1600 **RESPONSIBILITIES OF THE PROVIDER**

Providers are responsible for maintaining adequate financial and statistical records and making them available when requested for inspection by an authorized representative of the DHHS, Maine Attorney General’s Office or the Federal government. Providers shall maintain accurate financial records for these services separate from other financial records.

1700 **RECORD KEEPING AND RETENTION OF FINANCIAL RECORDS**

Upon request, providers have ten (10) business days to produce fiscal records to DHHS. Complete documentation shall mean clear written evidence of all transactions of the provider and affiliated entities, including but not limited to daily census data, invoices, payroll records, copies
1700 RECORD KEEPING AND RETENTION OF FINANCIAL RECORDS (cont.)

of governmental filings, staff schedules, time cards, member service charge schedule and amounts reimbursement by service, or any other record which is necessary to provide DHHS with the highest degree of confidence in the reliability of the costs of providing services. For purposes of this definition, affiliated entities shall extend to management and other entities for which any reimbursement is claimed, whether or not they fall within the definition of related parties.

The provider shall maintain all such records for at least five (5) years from the date of reimbursement.

1800 BILLING PROCEDURES

Providers will submit claims to MaineCare and be reimbursed at the applicable rate for the service in accordance with MaineCare billing instructions for the CMS 1500 claim form.

1810 Work Support-Group Rate

When billing for Work Support Services-Group the per person rate is based on the number of members served as follows:

<table>
<thead>
<tr>
<th>Members in Group</th>
<th>Rate per Unit Effective 7/1/18*</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>$4.24</td>
</tr>
<tr>
<td>3</td>
<td>$2.82</td>
</tr>
<tr>
<td>4</td>
<td>$2.12</td>
</tr>
<tr>
<td>5</td>
<td>$1.69</td>
</tr>
<tr>
<td>6</td>
<td>$1.41</td>
</tr>
</tbody>
</table>

*The Department is seeking approval from the federal Centers for Medicare and Medicaid Services (“CMS”) for these changes effective July 1, 2018.

1900 AUDIT OF SERVICES PROVIDED

The Department shall monitor provider’s claims for reimbursement by randomly reviewing the claim for services and verifying hours actually provided by collecting documentation from providers. Documentation will be requested from providers that corresponds to dates of service on claims submitted for reimbursement as follows:

A. Payroll Records – Documentation showing the number of hours paid to an employee that covers the period of time for which the Direct Care hours are being requested.
### MAINECARE BENEFITS MANUAL

**CHAPTER III**

**SECTION 29**

**ALLOWANCES FOR SUPPORT SERVICES FOR ADULTS WITH INTELLECTUAL DISABILITIES OR AUTISM SPECTRUM DISORDER**

**MAJOR SUBSTANTIVE RULE**

**Established:** 1/1/08  
**EFFECTIVE:** 7/28/19

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1900 **AUDIT OF SERVICES PROVIDED** (cont.)

- **B.** Staffing Schedules per facility – Documentation showing the hours and the name of the direct care staff scheduled to work at the facility.

- **C.** Member Records - Documentation that supports the delivery of services that a member received.

2000 **RECOVERY OF PAYMENTS**

The Department may recover any amounts due the Department based on Chapter I of the *MaineCare Benefits Manual.*
# APPENDIX I

<table>
<thead>
<tr>
<th>PROCEDURE CODE</th>
<th>SERVICE</th>
<th>MAXIMUM ALLOWANCE Effective 7/1/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>T2017</td>
<td>Home Support-Quarter Hour</td>
<td>$7.75 per ¼ hour</td>
</tr>
<tr>
<td>T2017 QC</td>
<td>Home Support-Remote Support-Monitor Only</td>
<td>$2.00 per ¼ hour</td>
</tr>
<tr>
<td>T2017 GT</td>
<td>Home Support-Remote Support-Interactive Support</td>
<td>$7.75 per ¼ hour</td>
</tr>
<tr>
<td>S5140</td>
<td>Shared Living (Foster Care, adult)-Shared Living Model-One member served</td>
<td>$156.00 per diem</td>
</tr>
<tr>
<td>S5140 UN</td>
<td>Shared Living (Foster Care, adult)-Shared Living Model-Two members served</td>
<td>$78.02 per diem</td>
</tr>
<tr>
<td>T2021</td>
<td>Community Support (Day Habilitation)</td>
<td>$6.53 per ¼ hour</td>
</tr>
<tr>
<td>T2021 SC</td>
<td>Community Support (Day Habilitation)- with Medical Add On</td>
<td>$8.05 per ¼ hour</td>
</tr>
<tr>
<td>T2019</td>
<td>Employment Specialist Services (Habilitation, Supported Employment waiver)</td>
<td>$9.09 per ¼ hour</td>
</tr>
<tr>
<td>T2019 SC</td>
<td>Employment Specialist Services (Habilitation, Supported Employment waiver)-with Medical Add On</td>
<td>$10.51 per ¼ hour</td>
</tr>
<tr>
<td>H2023</td>
<td>Work Support (Supported Employment)-Individual</td>
<td>$8.46 per ¼ hour</td>
</tr>
<tr>
<td>H2023 SC</td>
<td>Work Support (Supported Employment)-Individual with Medical Add On</td>
<td>$9.89 per ¼ hour</td>
</tr>
<tr>
<td>H2023 UN</td>
<td>Work Support (Supported Employment)-Group 2 members served</td>
<td>$4.24 per ¼ hour</td>
</tr>
<tr>
<td>H2023 UP</td>
<td>Work Support (supported employment)-Group 3 members served</td>
<td>up to $2.82 per ¼ hour</td>
</tr>
</tbody>
</table>

*The Department is seeking CMS approval for these changes effective July 1, 2018.*
# ALLOWANCES FOR SUPPORT SERVICES FOR ADULTS WITH INTELLECTUAL DISABILITIES OR AUTISM SPECTRUM DISORDER

**MAJOR SUBSTANTIVE RULE**

Established: 1/1/08  
Effective: 7/28/19

<table>
<thead>
<tr>
<th>PROCEDURE CODE</th>
<th>SERVICE</th>
<th>MAXIMUM ALLOWANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2023 UQ</td>
<td>Work Support (supported employment)-Group 4 members served</td>
<td>up to $2.12 per ¼ hour</td>
</tr>
<tr>
<td>H2023 UR</td>
<td>Work Support (supported employment)-Group 5 members served</td>
<td>up to $1.69 per ¼ hour</td>
</tr>
<tr>
<td>H2023 US</td>
<td>Work Support (supported employment)-Group 6 members served</td>
<td>up to $1.41 per ¼ hour</td>
</tr>
<tr>
<td>T2015</td>
<td>Career Planning (Habilitation, prevocational)</td>
<td>$34.29 per hour</td>
</tr>
<tr>
<td>S5165</td>
<td>Home Accessibility Adaptations</td>
<td>Per invoice</td>
</tr>
<tr>
<td>S5165 CG</td>
<td>Home Accessibility Adaptations repairs</td>
<td>Per invoice</td>
</tr>
<tr>
<td>97755</td>
<td>Assistive Technology-Assessment</td>
<td>$14.44 ¼ hour</td>
</tr>
<tr>
<td>T2035</td>
<td>Assistive Technology-Transmission (Utility Services)</td>
<td>Up to $50.00 per Month</td>
</tr>
<tr>
<td>A9279</td>
<td>Assistive Technology-Devices (Monitoring feature/device, stand alone or integrated, any type, includes all accessories, components and electronics, not otherwise classified)</td>
<td>Per invoice up to $6,000.00 per year</td>
</tr>
<tr>
<td>S5150</td>
<td>Respite Services- ¼ hour</td>
<td>$3.31 per ¼ hour</td>
</tr>
<tr>
<td>S5151</td>
<td>Respite Services- Per Diem</td>
<td>$110.21 per diem</td>
</tr>
</tbody>
</table>

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**Modifiers**

- CG: Policy Criteria Applied
- SC: Medical Add On
- HQ: Group Setting
- QC: Remote Support-Monitor Only
- GT: Remote Support-Interactive Support
- UN: Two Members Served
- UP: Three Members Served
- UQ: Four Members Served
- UR: Five Members Served
- US: Six Members Served

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*The Department is seeking CMS approval for these changes effective July 1, 2018.*