

NOTICE OF PROPOSED CHANGES TO THE MEDICAID
STATE PLAN GOVERNING PAYMENT METHODOLOGY
FOR EXTENDED DAY TREATMENT SERVICES

The State Department of Social Services (DSS) proposes to revise the rate setting methodology for Extended Day Treatment services.

Changes to Medicaid State Plan

The proposed State Plan Amendments will change the rate setting methodology for Extended Day Treatment services for dates of services on or after July 1, 2011. The change will be effective for extended day treatment services provided by licensed extended day treatment providers.

Fiscal Information

It is anticipated that the revisions to the rate setting methodology for Extended Day Treatment will not result in a change to federal Medicaid reimbursements. On an annual basis, federal reimbursement for Extended Day Treatment services is approximately \$2,000,000.

Additional Information

In accordance with federal requirements governing the Medicaid program, DSS will provide upon request a copy of the proposed amendment to the Medicaid State Plan. Copies of the proposed changes may be obtained at each of the DSS's regional offices and on the DSS web site: www.dss.state.ct.us. Go to "Publications" and then to "News and Updates".

Comments may be sent to William Halsey, Medical Care Administration, Department of Social Services, 25 Sigourney Street, Hartford, CT 06106-5033 (Phone 860-424-5077, Fax 860-424-5799, william.halsey@ct.gov). Please send all comments no later than July 12, 2011.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE CONNECTICUT

(13) Other diagnostic, screening, preventive and rehabilitative services

(a) Durable Medical Equipment

Except as otherwise noted in the plan, payment for these services is based on state-developed fee schedule rates, which are the same for both governmental and private providers of durable medical equipment. The agency's rates were set as of 2/1/2010 and are effective for services rendered on or after that date. The fee schedule is subject to periodic adjustment. All rates are published on the agency's website at www.ctdssmap.com.

(b) Rehabilitative Services

- (1) Psychiatric Services to children, youth and their families – Negotiated Rate. Effective July 1, 2011, the rate for Extended Day Treatment services is \$82.03 per unit. One unit is equivalent to one program day.
- (2) Birth to Three Services – Negotiated Rate.
- (3) Private Non-Medical Institutions for rehabilitation of children – Capitated Rate not to exceed the upper limits established in accordance with 42 CFR, Section 447.362
- (4) Private Non-Medical Institutions for rehabilitation of adults - An overall cost based capitation rate will be set for rehabilitative services provided by private non-profit group homes licensed by the Department of Public Health and certified by the Department of Mental Health and Addiction Services. The Department of Mental Health and Addiction Services certification will help assure that non-licensed mental health direct service staff have the level of education, experience, training, and/or supervision necessary to provide direct rehabilitative services as defined in Attachment 3.1-A. These direct service staff will hold either a bachelor's degree in a behavioral health related specialty or have two years experience in the provision of mental health services. The range of compensation will be consistent with this level of trained staff and individual qualifications.

The capitation rate will be a monthly rate. Facility providers will bill one unit per month for every Medicaid eligible individual. One capitation rate will be established and applied uniformly to all facility providers and to all Medicaid eligible recipients provided with a covered rehabilitative service during the month, whether the recipient was a resident of the facility for an entire month or a portion of the month. The capitation rate will be established based upon annual audited cost reports and semi-annual time studies. The time studies will be conducted for one week, twice each year, and will involve all staff present during the time study week and involved in the provision of rehabilitative services. All facility providers will be required to participate in the time studies to determine the portion of direct care staff time associated with these services.

TN# 11-024

Supersedes

TN # 10-018

Approval Date _____

Effective Date 7-1-2011