

## Rates Manual Explanation of Changes

This is not a formal document or part of the formal rule process, but is an attempt to explain changes in the rates manual using language we all can better understand. We will still not be able to answer further questions during the rule process, but hopefully this might answer some of the questions you have after looking at the rates manual.

Rates – we were allocated additional funding for a 2% rate increase. These changes are self explanatory.

All references to administrative fees were removed from the manual. Admin fees are allowed if they are contained within a rate. So Adult Foster for example, still can have an admin fee as part of what is charged to Medicaid, but we did not want to advertise that on the official manual that is referenced in rule. We will be updating the Service Category and Details document and give this same clarification there, per service, if applicable. For other services such as Adaptive Equipment and Home Modifications....there is no allowable 'admin fee' that can be charged to Medicaid so we removed any reference to admin fees on those from the official manual as well. Again, we will still allow admin fees the same way we have for the last fiscal year with the Admin Fee service line. Clarification regarding this will also be included in the Service Category and Details document. All admin fees will either be handled within a rate, or through the Admin Fee service line.

Caregiver Training & Support - We felt the way it was worded made it sound like the service HAD to be delivered each month. That is not the intent, and we want the service delivered as described in the plan of care. So IF the service is provided for a certain month, then a visual contact must be made during the invoiced hours.

Follow Along Support – consistent with last year's change to Supported Living, there is clarification that the hourly unit can be used if a monthly unit is cost prohibitive for the individual, and that hourly is the only choice for billing Follow Along via Self Direct Employer Authority.

WCCM – We felt the way it was worded made it sound like the service HAD to be delivered each month. That is not the intent, and we want the service delivered as described in the plan of care. So IF the service is provided for a certain month, then a visual contact must be made during the invoiced hours.