

WSC ADVISORY #2016-005
FISCAL YEAR 2016-2017 COST PLANS AND JULY 1 RATE INCREASES
ACTION REQUIRED BEFORE MAY 25, 2016

EFFECTIVE DATE: APRIL 22, 2016

This advisory informs Waiver Support Coordinators (WSCs) of action steps needed to ensure cost plans for Fiscal Year 2016-2017 are approved and service authorizations are issued to providers prior to July 1, 2016. After 1:00PM on April 23, 2016, most budgets for the upcoming fiscal year will be loaded in the iBudget system and WSCs may begin working on building service plans and submitting cost plans. Additional information will be forthcoming regarding the processing of budgets not loaded on April 23, 2016.

Please refer to the attached chart documenting the new rates for services effective July 1, 2016. The budgets for consumers containing authorized services impacted by rate adjustments will be increased to accommodate for the rate adjustments.

WSCs should begin work immediately to submit cost plans for continuation of services for the fiscal year for approval. In order for all services to be approved timely, WSCs must enter service plans and submit cost plans prior to **May 25, 2016**. If WSCs have concerns or questions regarding a specific consumer's budget amount, they should notify the Region office immediately.

In order to ensure continuity in services, WSCs may copy the cost plans from the previous year, but must ensure the following:

- Delete service plans for one time services that are not needed in FY 16-17. This might include services such as one time Durable Medical Equipment, Environmental Accessibility Adaptions, one-time dental treatments, or assessments;
- Delete service plans for services that have ended;
- If a provider change occurred in the prior fiscal year, delete service plans for the provider that is no longer rendering services;
- Enter notes on the service plans to specify service provision. The notes should provide direction to the provider on the manner in which services are to be provided and not duplicate information already identified on the service authorization; and
- Ensure service plans entered are in compliance with the iBudget Handbook coverage and limitations. Some example include, but are not limited to:
 - Respite and Personal Supports cannot be provided at the same time. Personal Supports is for individuals over 21, and Respite is for individuals under 21.
 - Ensure consumable medical supplies are not on plans for individuals under the age of 21 since they are covered by Medicaid State Plan
 - Ensure that behavior assistant services are only approved for 6 months at a time.

For individuals enrolled in the CDC+ program, if the monthly budget is increased due to the rate changes, the additional funds can be used without submitting a 7/1/16 Purchasing Plan. However, the service to be purchased and the provider must be authorized on the current approved Purchasing Plan. If a new service and/or provider is to be used, both can be added by using a Quick Update until a new Purchasing Plan can be submitted to be effective 8/1/2016.