




## COMMUNITY CHOICES WAIVER PROGRAM

### TEMPORARY BENEFIT COVERAGE STANDARDS

**Service Title:** Personal Support Services (AKA Direct Service Worker)

**Approval:** Tyler Deines, Community-Based Services Administrator 

**Approval Date:** May 29, 2020

**Effective Date:** May 29, 2020

**Service Definition (Scope):** Part-time or intermittent personal support assistance to enable waiver participants to accomplish activities of daily living (i.e., eating, bathing, grooming, dressing, toileting, and functional mobility) that they would normally do for themselves if they did not have a disability (to the extent permitted by state law). This assistance may take the form of hands-on assistance (actually performing a task for the person) or cuing to prompt the participant to perform a task.

Personal support services may also consist of general household tasks (i.e., meal preparation, grocery/personal needs shopping, and light housekeeping) when the participant is unable to manage the home and care for him or herself and the individual regularly responsible for these activities is temporarily absent or unable to conduct these activities.

Personal support services may be provided in the home or in the community when the participant requires assistance with activities of daily living in order to participate in community activities or to access other services in the community.

**Service Exclusions:** Personal support services may not include companionship or other services which are diversional/recreational in nature. Participant transportation costs are not associated with the provision of personal support services and must be billed separately.

**Service Limits:** Services are authorized by a case manager based on the participant's assessed needs. Medically necessary personal care services for individuals under the age of 21 are provided under the state plan in accordance with Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) coverage requirements.

**Provider Specifications:** Reimbursement is limited to the following provider type(s) which have been qualified and enrolled by the Division.

1. Home Health Agency licensed by the Wyoming Department of Health, Aging Division
2. Senior Centers approved by the Wyoming Department of Health, Aging Division to provide Title III-B Supportive Services under the Older Americans Act
3. Participant/Designated Employer of Record Under the Participant-Directed Service Delivery Option

**Reimbursement:** Community Choices Waiver services are reimbursed on a fee-for-service basis according to the standard fee schedule provided in the table below. Services must be prior authorized and included on the participant's service plan. Providers must maintain records which document the services provided and substantiate the claims submitted for reimbursement for a minimum of six years.

Service Type	Procedure Code	Modifier	Unit Value	Maximum Allowable Rate
Agency-Based	S5125		15 Minutes	\$3.78
Participant-Directed	T2041		15 Minutes	\$3.78