



CCW Rate Change Implementation Frequently Asked Questions (FAQs)

Why are provider rates changing?

The Division of Healthcare Financing (Division) conducted a study and updated the Community Choices Waiver (CCW) program’s reimbursement methodology in preparation of its application to renew the program for another five-year waiver period. The Centers for Medicare and Medicaid Services (CMS) requires rate determination methods to be consistent with 1902(a)30(A) of the Social Security Act, which states “Payments are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available under the plan at least to the extent that such care and services are available to the general population in the geographic area.”

The revised CCW rate model primarily employs a cost factor build-up approach to identify and calculate the reasonable and necessary direct and indirect provider costs associated with waiver service delivery. The Division’s rate model then combines the estimated cost factors to calculate the maximum allowable reimbursement rate for each waiver service. The CCW rate model’s net impact on annual program expenditures is estimated at \$950,000, or 2.5%. To review the full cost report, please visit <https://health.wyo.gov/healthcarefin/hcbs/hcbs-public-notices/>.

Which rates will change?

Based on the rate study, the Division will change rates for the following services:

- Adult Day Services
- Assisted Living Facility (ALF) Services
- Case Management
- Home Delivered Meals
- Home Health Aide
- Non-Medical Transportation
- Personal Emergency Response
- Personal Support Services
- Respite
- Skilled Nursing- the assessment is now built in

The Division is targeting a rate implementation date of July 1, 2021.

Will there be changes to service codes and names?

Yes.

Waiver Service	New		Previous	
	Code	Modifier	Code	Modifier
Adult Day Services - Health Model	S5101	U7	S5100	
Adult Day Services - Social Model	S5101		S5100	
Assisted Living Facility Services - Standard	T2031			
Assisted Living Facility Services - Memory Care Unit	T2031	U8		
Assisted Living Facility Services - Level I			T2031	U1

Assisted Living Facility Services <i>- Level II</i>			T2031	U2
Assisted Living Facility Services <i>- Level III</i>			T2031	U3
Case Management - Service Plan Development/Annual Update	T2024	U6		
Case Management - Monitoring	T2022			
Case Management - Agency Based			T2024	U1
Case Management - Assisted Living			T2024	U2
Case Management - Participant Direction			T2024	U3
Home Delivered Meals - Hot	S5170	SE		
Home Delivered Meals - Frozen	S5170			
Home Delivered Meals			S5170	
Home Health Aide	T1004		G0156	
Non-Medical Transportation - Public Transit Multipass	T2003			
Non-Medical Transportation - Service Route	A0120			
Non-Medical Transportation - Wheelchair Accessible Vehicle	A0130			
Non-Medical Transportation - Non-Wheelchair Accessible Vehicle	T2004			
Non-Medical Transportation			T2003	
Personal Emergency Response System (PERS) - Landline Installation	S5160			
PERS - Landline Monitoring	S5161			
PERS - Cellular Installation	S5160	CG		
PERS - Cellular Monitoring	S5161	U4		
PERS Installation			S5160	
PERS Monitoring			S5161	
Personal Support Services - Agency Based	S5125		S5125	
Personal Support Services - Participant Direction	S5125	U5	T2041	
Respite - In Home	S5150		S5150	
Respite - Assisted Living Facility	S5151		S5151	
Respite - Skilled Nursing Facility	H0045		H0045	
Skilled Nursing Services - Registered Nurse (RN)	T1002		S9123	
Skilled Nursing Services - Licensed Practical Nurse (LPN)	T1003			

Will there be unit changes?

Yes.

- Adult Day Services was previously a 15 minute unit, but is now a half day unit.
- Case Management was previously a daily unit, but now offers a monthly plan monitoring unit and an annual one time per plan year unit for plan development.
- Non-Medical Transportation for a public transit multipass is a per purchase unit.

- Skilled Nursing was previously a one hour unit, but is now a 15 minute unit.

Are services broken down differently?

Yes.

- Adult Day Services are broken down into a social model and a health model. Each service has a different modifier for billing.
- ALF Services are broken down into a standard model and a memory care unit model. The memory care unit model requires a modifier for billing.
- Case Management Services are broken down into monthly plan monitoring and annual plan development.
- Home Delivered Meals are broken down into a hot meal and a frozen meal service.
- Non-Medical Transportation now has four service types: public transit multipass, service route, wheelchair accessible vehicle, and non-wheelchair accessible vehicle.
- Personal Emergency Response System has landline or cellular options for both installation and service monitoring.
- Skilled Nursing now has a registered nurse (RN) and licensed practical nurse (LPN) option.

How does this affect participant-directed services?

The rate changes will impact the allowable budget for participant direction. If the employer of record would like to increase wages for their employees, the employer of record must complete a wage change form, and the case manager must submit the form to ACES\$. If the case manager doesn't submit the form to ACES\$, the changes won't be reflected on the employee's paycheck. As a reminder, wage changes won't go into effect until the next pay cycle.

When will the rate change become effective?

The CCW renewal has been submitted to CMS. The target date for implementation is July 1, 2021.

What is the visual timeline for this process?

Date	Entity Responsible	Action
January 20, 2021	Division	The waiver renewal application was submitted to CMS.
June 21, 2021	Case manager	All modifications and service plans (not specific to rate changes) are submitted.
June 30, 2021	Division	All modifications and service plans submitted by June 21, 2021 are reviewed.
June 30, 2021 to July 1, 2021	Division	EMWS unavailable for plan work while system updates are completed.
July 1, 2021	CMS/Division	Effective date of new rates.
July 2, 2021	Division	EMWS back online for plans.
August 31, 2021	Case manager	All modifications and requests related to the rate changes submitted.

Which waiver services will be eliminated?

No waiver services have been eliminated. Skilled nursing assessment services will no longer be billed separately as the costs associated with those activities have been incorporated into the reimbursements for skilled nursing services.

Will the Division inform providers about the rate changes?

Yes, the Division will inform providers of the changes through email blasts and provider support calls.

Will case managers be able to access, complete, and submit monthly reviews in EMWS while the system update is in progress?

Yes, monthly reviews will be available. The Division does not foresee any issues with losing saved data that has been entered into these reports while EMWS is being updated with the new provider rates.

Do July renewal plans need to be completed before the system becomes unavailable?

Yes, July plans need to be completed before the system work begins on July 1, 2021. August plans do not need to be submitted before the system work is completed.

When will EMWS actually become unavailable for plan modifications for case managers?

Case managers will still be able to see the plans, but no changes should be made after June 21, 2021.

When will case managers be able to access all sections of EMWS again?

The Division will send out an email blast as soon as the system is fully available. However, July 2, 2021 is the date that full EMWS access is anticipated.

Are plan modifications needed in order to move all units from July 1, 2021 forward?

The system modifications should automatically move the units from the old rate line to the new rate line, but if this doesn't happen on some lines, the case manager is responsible for updating the lines. Case managers should review all plans to ensure unit splits are correct. Meals, skilled nursing and transportation service lines will have to be modified by the case manager after determining which service is most appropriate.