



Service Plan Modifications for CCW Rate Changes Frequently Asked Questions (FAQs)

Can case managers submit a plan modification to add services with a July 1, 2021 start date?

If the service plan was not modified to add Home Delivered Meals – hot, PERS- cellular, or new transportation service options, the case manager may add these new service lines with a July 1, 2021 start date. However, all modifications of this type must be completed and submitted no later than July 31, 2021. Modifications submitted for this reason submitted after July 31, 2021, will not be accepted.

Does a new Provider Duty Sheet (PDS) or participant agreement form need to be signed and submitted with the rate change modifications?

If the units are not changing and the case manager is just moving units to the new service code line, then a signed participant agreement or PDS is not needed. If the case manager is adding additional services or units that were not previously on the service plan, then a signed participant agreement will be needed for the new service plan format or new PDS will be needed for the old service plan format.

Should the service units for billing code T2040 be zeroed out?

Yes. If an old service plan is being modified, zero out any units that are already listed for this service code. The T2040 billing code was discontinued some time ago and is no longer valid. The Electronic Medicaid Waiver System (EMWS) will issue an error message if the units for each month are not zeroed out.

Are seven days required for these modifications?

Yes. As a general rule, the Division of Healthcare Financing (Division) would like case managers to adhere to the seven day rule. However, there are some unique situations that may require flexibility. Please work with the county assigned Benefits and Eligibility Specialist (BES) to determine if the seven days may be waived on a case by case basis.

How will providers be paid for the services at the new rate if the modifications have an effective date that is seven days after they are submitted in EMWS?

The following services may have a start date of July 1, 2021

- S5170SE- Home Delivered meals – Hot
- S5161U4 - PERS – cellular
- A0120 - Non-medical transportation – service route
- A0130 - Non-medical transportation – wheelchair accessible vehicle
- T2003 - Non-medical transportation – non-wheelchair accessible vehicle

The modification date should allow seven days for Division review. If the case manager experiences issues with the PERS services, they should work with the county assigned BES to resolve the issue.

Why is my participant-directed service being rejected?

ACES\$ will reject lines submitted via the provider portal if the budget worksheet does not open or if the budget worksheet does not match with the system requested total. Please upload all budget worksheets into EMWS as a PDF document so that the document will open when sent to ACES\$ via the Portal. The monthly frequency option should be selected for Personal Support Services so that it matches the budget worksheet total. If the total in EMWS doesn't match the worksheet, the request will be rejected.

Is there an updated Participant-Directed Budget Calculator?

Yes. The updated calculator may be found on the [HCBS Document Library](#) page of the Division website, under the *CCW Case Manager Forms* tab. ACES\$ will reject the service request if the most recent calculator is not completed and submitted via EMWS to the provider portal.

What is the visual timeline for this process?

Date	Entity Responsible	Action
July 3, 2021	Division	EMWS is back online for plans.
July 31, 2021	Case manager	All modifications for the outlined services with July 1, 2021 start dates must be submitted.