Catholic Charities Disabilities Services	
Agency Standard	
Standard Category	Individualized Community Services
Standard Title	Respite Billing
Regulations	1) OPWDD ADM #2017-01 2) OPWDD Audit Protocol - January 1, 2020 3) OMIG Audit Protocol – Respite Effective April 1, 2014 4) 14 CRR-NY 635 5) OPWDD ADM #2026-01 DRAFT
Original Issue Date	07/16/2024
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Number of Pages	2
Attachments	
Approved by: Paula Warika, Executive Director	Paula Warika

Standard:
Catholic Charities Disabilities Services' Traditional Respite services will be provided and documented for billing following all appropriate laws, regulations and guidance. Documentation will be prepared and presented to the Fiscal Department in a timely and appropriate manner.

Definition:

1. *Contemporaneous*: To meet the minimum billing standards, the daily service notes or checklists must be completed by the end of the day no later than two (2) business days following the date the service was provided. The monthly summary notes must be completed no later than the end of the month following the month of service provision.

2. *Traditional Respite Services*: Respite Waiver services provided outside of Self-Direction budgets.

3. *In-Home Respite Services*: Services provided in a person's family home or in another non-certified/non-licensed home that is not the person's own family home. In-Home Respite activities may also include staff accompanying the person to community (non-certified) settings.

Procedure:

1. The Director of Individualized Community Services (ICS), or designee, will maintain copies of the Notice of Determination (NOD), Level of Care (LOC or LCED), DDP-1, DDP-2, Liability Notice, and Memo of Understanding (MOU).

2. The Director of ICS, or designee, attends individuals Life Plan Meeting annually and the Semiannual Meeting. The individual and care manager schedules this.

3. Upon receipt of the draft Life Plan from the Care Manager, the Director of ICS, or designee, will review for accuracy, including the agency is listed appropriately as the provider of In-Home Respite Services.

4. The Director of ICS, or designee, will review the respite safeguards in Section 3 of the Life Plan, to ensure they are recorded as per discussion at the meeting.

5. The Director of ICS, or designee, will update the agency documentation of Safeguards ensuring congruence with the Life Plan as also to include additional agency specific requirements:
    a. A statement about the Individual's assessment for swimming safety, if applicable.
    b. Any other situational specific safeguards for Respite services.

6. The Director of ICS, or designee, will send the safeguards to the respite staff within 60 days of the meeting. The safeguards will be saved in the physical in the binder as well as in the g-drive under: G:\ICS\Individuals\ComHab.

7. Once the Life Plan is "approved", the Care Manager must send the final copy no later than 45 days from the meeting date. The Director of ICS, or designee, will obtain this document and save it in the physical binder for the Individual.

8. Community Support Professional's (CSP) will clock in through electronic health record platform, which will include the EVV required data.

9. The Director of ICS, or designee, will review time entries for errors.

10. The Director of ICS, or designee, reaches out to staff to reconcile any issues identified.

11. The Director of ICS, or designee, will reconcile for billing by uploading reports biweekly.

12. The Director of ICS, or designee, will generate a billing report that is sent to finance bi weekly.
    a. The Director of ICS, or designee, will review the generated report and check for:
        - No overlapping services for the same individual
        - Overnight hours are appropriated separated billing dates into each day
    b. Director of ICS, or designee, will save the report in the ICS billing folder in the g drive for minimally 2 years.
    c. Director of ICS, or designee, will email the billing report to the designated finance staff who will process the billing.