Catholic Charities Disabilities Services	
Agency Standard	
Standard Category	Individualized Community Services
Standard Title	Traditional Community Habilitation Billing
Regulations	1. OPWDD ADM #2015-01 2. OMIG Audit Protocol – Community Habilitation Effective April 1, 2014 3. 14 CRR-NY 671.6 4. ADM 2026-01 DRAFT
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Standard:
Traditional Community Habilitation (Com Hab) 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.

Definitions:

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 Community Habilitation*: Community Habilitation services outside of a Self-Direction service model. This may include individuals who live in private residences or certified settings, as will be billed in accordance with the circumstances.

3. *Group billing:* Services provided to more than one Individual receiving services at the same time, by the same staff.

4. *Service documentation:* Documentation by the staff delivering the service or having knowledgeable about the service delivered should be written within 3 business days of the time that the service is delivered; however, subsequently, a Director of Individualized Community Services or designee can determine if an amendment to the documentation is warranted. The agency standard for submission of contemporaneous billing is as defined in the Agency Written Instructions Standard.

Procedure:

1. The ICS Supervisor will maintained 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 ICS Supervisor will ensure the DDP-1 program code is congruent with the living situation of the individual receiving services, as is changed if their living situations necessitates.
    a. For Com Hab-Residential (CH-R) (lives in an IRA) 75820143
    b. For Com Hab (living on own/with parents) 75820430

3. The ICS Supervisor attends individuals Life Plan Meeting annually and the Semiannual Meeting, virtually or in-person. The individual and care manager schedules this. Upon receipt of the draft Life Plan from the Care Manager, the ICS Supervisor will review it for accuracy.

4. The ICS Supervisor will review the draft Life Plan and ensure:
    a. The agency is listed accurately
    b. The Waiver Service is listed accurately
    c. The Goals assigned to the agency are listed as agreed upon
    d. The safeguards related to the agency goals, supports and tasks are listed as agreed upon

5. Once "approved", the care manager must send the final copy no later than 45 days from the meeting date. The ICS Supervisor will save this LP in the physical binder and upload it as an attachment to the concurrent SAP.

6. ICS Supervisor 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.

7. The ICS Supervisor will send the safeguards to the Community Supports Professional within 60 days of the meeting. The safeguards will be saved in the physical in the binder as well as in the g drive G:\ICS\Individuals\ComHab and attached in the electronic health record.

8. The ICS Supervisor must create a Staff Action Plan (SAP) and distribute to the individual, staff, and care manager within 60 days of meeting. The SAP will be reviewed at least twice annually. The ICS Supervisor or designee will create and save meeting notes as well as update the SAP when required, but no less than annually.

9. The ICS Supervisor create a note template for staff so they are able to begin providing and documenting the service as per the SAP.

10. Billable notes are generated by Community Support Professionals (CSPs) through electronic health record system. The electronic record provide proof of Electronic Visit Verification (EVV).
    a. CSP's will check into Therap EVV system to start and end their face-to-face time with each individual they are scheduled to work with.
    b. CSP's will notify their supervisor of any problems logging into the system to check in or out of services or if they are unable to complete their documentation.
    c. If the CSP missed check in or check out, the ICS Supervisors will create timeslots for CSP. CSP will provide an explanation via email of what/why it was not submitted. The email will be attached by the supervisor to the timeslot created. Once completed by the supervisor the CSP will be notified, the CSP can now complete their note.
    d. CSP's will complete one service note for each goal worked on for each shift Community Habilitation services were provided.

e. CSP's must complete all documentation within two (2) business days.
f. CSP's will provide services that are written in the person's SAP goals and document on those activities.

11. ICS Supervisor or designee will run daily reports, which upload completed notes from Therap as well as time records from ADP into the Intranet system for ICS Supervisors to review daily notes and accept or send back to the CSP for correction. Instructions for running these reports are included in the Intranet application.

12. The assigned Community Support ICS Supervisor reviews the note no less than weekly.
    a. The ICS Supervisor is looking to ensure notes are completed contemporaneously.
    b. ICS Supervisors will review timecards and EVV times to ensure they are correct for time scheduled to work. This will include utilizing the Shifts Tab in the Intranet, and the "red" "green" boxes.
        i. If a note is marked with a red "X" but is approved as a billable time, the ICS Supervisor can "override" the "red" mark and change it to green.
        ii. If this is non-billable time, the ICS Supervisor or designee can use the drop down function to change the shift to "non-billable."
    c. Content review to ensure activities performed are in line with the individual's staff action plan. For medical appointments, reimbursement is available for CH staff but must be supported by the SAP. Some parameters include no more than 12 clinical appointments per person, per clinical service type.
    d. The note must include: staff's action to support the goal, individual's response to service, and may include the overall status of a goal (progression, maintain, regression). The note will indicate face-to-face services, ratio, and location of services.
    e. If the individual resides in an Individualized Residential Alternative (IRA) or Community Residence (CR), the Supervisor will notify the CCDS Finance department via email and inform the individual and staff of the parameters around Community Habilitation Services. The supervisor will monitor hours of service to ensure compliance with OPWDD regulations.
    f. In the notes section of the Intranet, the ICS Supervisors will mark the documentation as "read" if correct and will then be submitted for billing. The intranet "book" symbol will be removed when the ICS Supervisor clicks "read".

13. The ICS Supervisor reaches out to staff to reconcile any issues identified.

14. The ICS Supervisor completes a monthly note summarizing supports provided over the course of the previous month. Must summarize the implementation of the person's Staff Action Plan and address any issues or concerns. Monthly note will include the progression, regression or maintenance of the goals in the SAP for each individual and will be completed by the end of the month following the service provision.

15. Any goal that is not worked on during a month should be indicated in plan review meeting notes and include the reason why it was not completed.

16. Annually, the ICS Supervisor or designee will complete a Clinical Note regarding services provided by each CSP during that previous year.

17. ICS Director or designee will reconcile for billing by uploading reports daily.

18. ICS Director will generate, review, save and submit via email a billing report biweekly.
    a. ICS Director will review the generated report and check for:
        i. Group Billing correctly listed
        ii. No overlapping services for the same individual (if two or more staff work with the same individual, they are not providing services at the same time)
        iii. Individuals who live in a certified setting are appropriately indicated and the services are within allowable circumstances. Com Hab for Individuals residing in a certified setting must meet the following:
            1. Services must be delivered on a weekday
            2. Service start time must be prior to 3pm
            3. CH may not occur on a day when the individual receives one full unit of group day hab
            4. On a given day, the maximum reimbursement is six hours of CH or a combination of four hours CH and one half unit of group day hab
        iv. Overnight hours are appropriated separated billing dates into each day
    b. ICS Director will save the report in the ICS billing folder in the g drive for minimally 2 years.
    c. ICS Director will email the billing report to the designated finance staff who will process the billing. This email will include the ICS Department Director cc'd on the email.

19. Once a service note is pulled from the intranet in the generated billing report, a "$" sign will appear next to the service note.