To: Developmental Disabilities Waiver (DDW) Case Managers and Providers

From: Leah Manning, Statewide Case Management Coordinator

CC: Scott Doan, Deputy Director and Marie Velasco, DDW Program Manager

Subject: New Budget Worksheet (BWS) and Implementation of Provider Rate Increases

On September 24, 2020 the Centers for Medicare and Medicaid Services (CMS) approved an amendment to the DDW increasing provider rates. The amendment, effective October 1, 2020, increases rates for the following services:

<table>
<thead>
<tr>
<th>Procedure Description</th>
<th>Proc Code</th>
<th>Mod</th>
<th>Mod</th>
<th>Mod</th>
<th>Unit</th>
<th>October 1, 2020 Amendment Unit Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Management On-Going</td>
<td>T2022</td>
<td>HB</td>
<td></td>
<td></td>
<td>Month</td>
<td>$314.35</td>
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<tr>
<td>Community Integrated Employment, Group, Category 1</td>
<td>T2019</td>
<td>HB</td>
<td>HQ</td>
<td>TG</td>
<td>15 Min</td>
<td>$2.22</td>
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<tr>
<td>Community Integrated Employment, Group, Category 2 Extensive Support</td>
<td>T2019</td>
<td>HB</td>
<td>HQ</td>
<td>TG</td>
<td>15 Min</td>
<td>$3.69</td>
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<tr>
<td>Community Integrated Employment, Self-Employment</td>
<td>T2019</td>
<td>HB</td>
<td>UA</td>
<td></td>
<td>15 Min</td>
<td>$15.30</td>
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<td>Community Integrated Employment, Job Aide</td>
<td>99509</td>
<td>HB</td>
<td></td>
<td></td>
<td>Hour</td>
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<td>Community Integrated Employment, Intensive</td>
<td>T2013</td>
<td>HB</td>
<td>U2</td>
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<td>Hour</td>
<td>$56.42</td>
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<tr>
<td>Customized Community Support, Group, Category 2 Extensive Support</td>
<td>T2021</td>
<td>HB</td>
<td>U8</td>
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<td>15 Min</td>
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<td>Customized Community Support, Small Group</td>
<td>T2021</td>
<td>HB</td>
<td>U9</td>
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<td>15 Min</td>
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<tr>
<td>Crisis Support (Alternative Residential Setting)</td>
<td>T2034</td>
<td>HB</td>
<td></td>
<td></td>
<td>Day</td>
<td>$465.49</td>
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<tr>
<td>Crisis Support (Individual's Residence)</td>
<td>T2011</td>
<td>HB</td>
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<td></td>
<td>15 Min</td>
<td>$9.70</td>
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<tr>
<td>Supported Living, Category 1 Basic Support</td>
<td>T2016</td>
<td>HB</td>
<td>U4</td>
<td></td>
<td>Day</td>
<td>$210.35</td>
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</table>
### Provider Information

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Code</th>
<th>Type</th>
<th>Frequency</th>
<th>Rate</th>
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<tbody>
<tr>
<td>Supported Living, Category 2 Moderate Support</td>
<td>T2016</td>
<td>HB</td>
<td>U5</td>
<td>$258.69</td>
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<tr>
<td>Supported Living, Category 3 Extensive Support</td>
<td>T2016</td>
<td>HB</td>
<td>U6</td>
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<tr>
<td>Supported Living Category 4 Extraordinary Medical/ Behavioral Support</td>
<td>T2016</td>
<td>HB</td>
<td>U7</td>
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<td>Intensive Medical Living Services</td>
<td>T2033</td>
<td>HB</td>
<td>TG</td>
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<td>Nutritional Counseling</td>
<td>S9470</td>
<td>HB</td>
<td>15 Min</td>
<td>$21.10</td>
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<td>Preliminary Risk Screening and Consultation for Inappropriate Sexual Behavior, Standard</td>
<td>T1023</td>
<td>HB</td>
<td>UA</td>
<td>$26.94</td>
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<td>Preliminary Risk Screening and Consultation for Inappropriate Sexual Behavior, Incentive</td>
<td>T1023</td>
<td>HB</td>
<td>UA</td>
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<td>Respite - Group</td>
<td>T1005</td>
<td>HB</td>
<td>HQ</td>
<td>$3.28</td>
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</table>

Rate increases will automatically be paid through the standard billing and claims process for any applicable service that is provided on or after October 1, 2020.

Implementation of the revised BWS will proceed as follows:

1. Case Managers are issued two new BWS:
   a. BWS V-JCM-2020-10-01 which reflects the rate increases and is used for Jackson Class Members
   b. BWS V-OR-2020-10-01 which reflects both rate increases and adjustments to Suggested Dollar Amounts and is for adult non-Jackson Class Members.
2. Revisions are NOT necessary to access the rate increase on already approved services. The rate adjustment is made in the NM Medicaid Management Information System (MMIS) and claims will be processed accordingly even if the approved BWS does not reflect the correct rate.
3. Sequential revisions on a previously approved BWS (BWS V-JCM 2019-01-01 or BWS V-OR-2019-01-01) should continue to be submitted through the standard process and on the same BWS until the Individual Service Plan (ISP) term is complete.
4. There are NO CHANGES to the budget submission process. However, the appropriate new BWS should be used for all annual and initial (new allocations) submissions made on or after November 1, 2020.

Providers may access the DDW fee schedule on the Medical Assistance Division (MAD) website at: [https://www.hsd.state.nm.us/providers/fee-schedules.aspx](https://www.hsd.state.nm.us/providers/fee-schedules.aspx). Review and accept the terms and conditions of the website at the bottom of the page to be directed to provider fee schedules.
a. Annual and initial BWS submitted on or after November 1, 2020 using the old BWS (V-OR-2019-01-01 or V-JCM-2019-01-01) will be issued an Unable to Work from the CORE or a Request for Information (RFI) from the TPA.

5. If a Case Manager is able to submit the annual or initial on the new BWS prior to the November 1, 2020 implementation date, the BWS will be accepted by the CORE and TPA.

Information regarding DDSD’s rate determination decision is available on the website: https://www.nmhealth.org/publication/view/report/6268/.