

## Assistive Technology Fund Requests Guidance Document for DD Waiver Providers, CORE and TPA

10/13/2020

The Clinical Services Bureau and Community Programs Bureau have noted a recent increase in Assistive Technology (AT) Fund application issues. This document addresses key areas for DDSD staff, DD Waiver providers, and all external review entities to make the AT budget request and approval process as efficient as possible.

**Errors in the AT Fund Application:** It is critical that there is an Interdisciplinary Team (IDT) discussion about appropriate equipment to meet the individual's needs for AT. In addition, incomplete applications and basic errors are resulting in a Request for Information (RFI) issued to case managers which cause delays in approval. To remove the risk of errors, please follow the guidance in this document.

**Extension of Access to Additional AT Funding:** With the Appendix K amendment and approval by the Centers for Medicare and Medicaid Services (CMS), the maximum allowed amount for AT funds for the DD Waiver during the Public Health Emergency is expanded to \$500.00. **Case Managers and teams have until January 26, 2021, 11:59 pm to submit revisions to access the \$500.00 for Assistive Technology.** The additional \$250 allowance to support telehealth can only be accessed within one Individual Service Plan term during the Public Health Emergency.

**Price Changes/Cost Adjustments:** Due to COVID-19, rapid price increases may occur for AT devices, including telehealth-related equipment. For example, *AT was approved for \$200.00. At the time of purchase, the price increased to \$260.00. If the person or family is unable to make up the difference, an additional AT Fund request through a revision to the approved budget may be made for the additional funds.*

- The AT Purchasing agent must maintain accurate accounting with receipts of purchasing for DD Waiver Service Standards Ch 14.1
- If the cost adjustment is higher than the originally approved amount:
  - ✓ A revision budget must be submitted for approval per instructions below; and
  - ✓ If an approved upwards cost adjustment occurs after the AT purchasing agent billed the originally approved amount, the AT Purchasing Agent bills for the additional amount.
- If the cost adjustment is lower than the originally approved amount:
  - ✓ A revision budget does NOT need to be submitted for approval but the AT Purchasing Agent and Case management records and Budget Based AT Application must accurately reflect funds used.
  - ✓ If a downward cost adjustment occurs after the AT purchasing agent billed the originally approved amount, the AT Purchasing Agent must void and adjust billing to assure there is no payment of Medicaid funds above the actual cost of the item. For detailed instructions on procedures for Adjustment, Void, and Rebill Online Claims Entry, see the NM Medicaid Portal at:  
[https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#Third\\_Party\\_Assessor](https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#Third_Party_Assessor).

### **The Budget Based AT Fund application:**

- The Current Budget Based AT Fund application is posted online at:  
<https://www.nmhealth.org/publication/view/form/4512/>
- A therapist, case manager or another person can complete the application.
- The AT request must meet the “DDSD Clinical Review and Clinical/Service Criteria V.5”:  
<https://www.nmhealth.org/publication/view/general/4516/>
  - ✓ Assistive Technology services allow individuals to purchase needed items to develop low-tech systems or purchase devices for augmentative communication, environmental access, mobility systems, and other functional AT, not covered through the individual’s Medicaid State Plan benefits. (Note \$40 in batteries is allowable.)
  - ✓ The specific AT must relate to a Vision or desired outcome in the Individual Service Plan (ISP); **or**
  - ✓ The specific AT must support participation or independence during activities such as, but not limited to, employment, community activities, leisure activities and activities of daily living, personal interactions, or personal safety during these types of activities.
  - ✓ The justification/rationale section of the form (i.e., ***Criteria for the Funding of Assistive Technology (AT)***) must be complete. This section should include **how the device meets individual telehealth needs during the Public Health Emergency (when accessing the additional \$250).**

### **Budget Submission Guidelines for the Case Manager:**

- Prior to submission of the AT application and Budget Worksheet, assure that all documents are saved and sent as a PDF.
- All calculations, costs, and the 10% fee added on to the total amount requested must be accurate on both the Budget Based AT Application and the MAD 046 or Budget Worksheet. Please check the math.
- A visible photograph or a .pdf of the webpage showing the specific items being requested and the costs must be included.
- The Budget Based AT Application form must be signed. Electronic signatures may be used. A “typed” signature in Word is not sufficient.
- The case manager can submit a revision for AT with a start date that is at least one day greater than the date of submission and does not need to project a start date 30 days in the future. (Note: OR processes any submission after 5pm or on weekends or holidays on the next business day).
- The application must be complete for the individual’s file, but the following items are not required for the budget approval process:
  - the individual’s Social Security Number (SSN);
  - contact person’s details; and
  - the Purchasing Agent section.
- **Submissions for cost adjustment to increase AT amount on prior approved item:**
  - ✓ For submissions to CORE, the revision budget for a cost adjustment cannot be submitted until Comagine finalizes and completes their portion in JIVA. Submit the OR Coversheet and:
    - i. Refer to the OR Reference number where the AT was previously approved.
    - ii. Make a note as to what the original price was or substitution of similar product and the cost increase,

- ✓ For submissions to Third Party Assessor (Jackson Class Members and children)
  - i. Reference the PA# and the JIVA episode where AT was previously approved.
  - ii. Make a note as to what the original price was or substitution of similar product, and the cost increase.
- ✓ Submit Budget
  - i. Individual Service Plan- required if the AT cannot be substituted for a comparable item (complete change).
- ✓ Provide an updated print out of the item and the price.
- ✓ Provide an updated AT Fund Application to document the price increase and to match the amount to the budget worksheet or MAD046.
  - i. Write "Revised due to cost adjustment" on the vendor section of the AT Fund application.
  - ii. If item is being completely substituted, write a brief description as to why. in the ***Criteria for the Funding of Assistive Technology (AT) section of the AT Fund Application***