

Technical Guidelinesⁱ

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7095	Behavioral Support	15 minutes	<p>Each service note must include</p> <ul style="list-style-type: none"> - Start and end time; - Behavioral Specialist signature (Esignature is allowed) and title; - Name and signature of supervisor who is licensed or has a Master's Degree (as applicable); - Whether/which paid/unpaid caregivers were present; and - Date of evaluation/assessment and current behavior support plan. <p>A service note must be included for each continuous span of 15 minute units that describes service activities. The requirement can be achieved by using a checklist to indicate the assistance provided to or on behalf of the participant. When applicable, service notes should include/address</p> <ul style="list-style-type: none"> - Collection and evaluation of behavioral data; - Observation and collaboration to develop a behavior support plan; - Functional assessments of presenting issues; - Development and maintenance of behavior support plans; - Training related to the implementation of behavior support plans; - Implementation of activities and strategies identified in the participant's behavior support plan, which may include educating and/or counseling the participant and supporters regarding the underlying causes/functions of behavior and modeling and/or coaching of supporters to carry out interventions; - Monitoring implementation of the behavior support plan, and revising as needed; 	<p>Progress Notes must</p> <ul style="list-style-type: none"> - Include progress (or lack of) toward authorized plan outcomes and actions documented in the Individual Support Plan (ISP); - Include action planned/taken to address lack of progress, if applicable; and - Must be completed at least monthly in any calendar month the service is provided.

		<ul style="list-style-type: none"> - Collaboration with the participant, his/her family, and his/her team in order to develop positive interventions to address specific presenting issues; and - Completion of required paperwork related to data collection, progress reporting, and development of annual planning material. 	
T2025	Nursing – Registered Nurse (RN), Licensed Practical Nurse (LPN)	<p>Each service note must include</p> <ul style="list-style-type: none"> - Start and end time; and - Nurse signature (Esignature is allowed), license type – Registered Nurse (RN) or Licensed Practical Nurse (LPN) Nurse, and title. <p>A service note must be included for each continuous span of 15 minute units that describes what activities the nurse performed in relationship to the nursing care plan. Based upon the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.</p>	<p>Progress Notes must</p> <ul style="list-style-type: none"> - Include progress (or lack of) toward authorized plan outcomes and actions documented in the ISP; - Include action planned/taken to address lack of progress, if applicable; and - Must be completed at least monthly in any calendar month the service is provided.
	Speech and Language Therapy	<p>Each service note must include</p> <ul style="list-style-type: none"> - Start and end time; and - Therapist signature (Esignature is allowed), license type, and title. <p>The service note should describe what the therapist did in relation to the orders of the participant’s licensed physician, or an evaluation and recommendation as specified in the approved waivers (PT and OT–Prescription by a physician; Speech and Language--Evaluation and recommendation by an American Speech-Language-Hearing Association (ASHA) certified and state licensed speech-language pathologist or physician; Behavior--Evaluation and recommendation by a licensed psychologist or psychiatrist; and Orientation, Mobility, and Vision--Evaluation and recommendation by a trained mobility specialist/instructor or a physician.)</p>	<p>Progress Notes must</p> <ul style="list-style-type: none"> - Include progress (or lack of) toward authorized plan outcomes and actions documented in the ISP; - Include action planned/taken to address lack of progress, if applicable; and - Must be completed at least monthly in any calendar month the service is provided.
	Occupational Therapy (OT)		
	Physical Therapy (PT)		
	Behavior Therapy - Individual Therapy		
	Orientation, Mobility, and Vision		

	Therapy		A service note must be included for each continuous span of 15 minute units that describes what the therapist did in relation to the orders or evaluation. Therapists develop a care plan and should document activities performed in relationship to the care plan.	
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Residential

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W6090 W6092 W6094 W6096 W6098 W7010 W7012 W7014 W7016 W7018 W7020 W7022 W7024 W7026 W7028 W7291 W7293 W7295 W7297	<p>Licensed Community 1, 2, 3, 4, 5-10 Individual Home (55 Pa. Code Chapter 6400 -Community Homes)</p> <p>Licensed Child Residential 1, 2, 3, 4, 5-10 Individual Home (55 Pa. Code Chapter 3800 - Child Residential Facilities)</p> <p>Licensed Community Residential Rehab 1, 2, 3, 4, 5-10 Individual Home (55 Pa. Code Chapter 5310 - Community Rehabilitative Residential Services)</p> <p>Licensed Residential Family Home Adult 1, 2 and Child 1, 2 Individual Home (55 Pa. Code Chapter 6500 (Family Living Homes) All residential services, including U1 Modifier – Enhanced Communication Service</p> <p>W6090 – W6099 include UA Modifier – Semi Independent Living</p>	One day	<p>Documentation that indicates a contact with the participant is required to confirm presence for each billed day – this may be an attendance roster, a progress note, a medication administration record (MAR), etc. An affirmative confirmation that documents the person was present rather than assumes the person was present is essential.</p> <p>The provider must retain staff time sheets (including ESignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <ul style="list-style-type: none"> - Exceptions include Therapeutic Leave which requires start and end times on the day of absence and return, and Medical Leave which requires admission and discharge date from medical center 	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code, § 51.16(d) and applicable licensing codes, provider staff must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Progress notes must document substantive issues that impact the participant’s</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>

<p>W6092 W6094 W6096 W6098 W7291 W7293</p>	<p>Licensed Community 2, 3, 4, 5-10-Individual Home (Licensed under 55 Pa. Code Chapter 6400)-TE</p> <p>Family Living 1-Individual Home Adult (Licensed under 55 Pa. Code Chapter 6500)-TD (service provided by a RN) and TE (service provided by a LPN).</p> <p>Family Living 2-Individual Home Adult (Licensed under 55 Pa. Code Chapter 6500)-TD</p>	<p><u>Same as above:</u></p> <p>Documentation that indicates a contact with the participant is required to confirm presence for each billed day – this may be an attendance roster, a progress note, a MAR, etc. An affirmative confirmation that documents the person was present rather than assumes the person was present is essential.</p> <p>The provider must retain staff time sheets (including ESignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <p>Exceptions include Therapeutic Leave which requires start and end times on the day of absence and return, and Medical Leave which requires admission and discharge date from medical center.</p> <p><u>In addition:</u></p> <ul style="list-style-type: none"> - License Type – RN or LPN, - Nurse Title <p>A service note must be included for each one day unit that describes what the nurse did to address any health/medical interventions performed by the nurse. Based upon</p>	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code §51.16(d) and applicable licensing codes, the Program Specialist must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Progress notes must document substantive issues that impact the participant’s</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
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			the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.	
W7037 W7039 W7078 W7080 W7082	Community Residential Rehabilitation--Unlicensed 1, 2 Individual Family Living Home Residential Habilitation--Unlicensed 1, 2, 3 Individual Home		<p><u>Same as above:</u> Documentation that indicates a contact with the participant is required to confirm presence for each billed day – this may be an attendance roster, a progress note, a MAR, etc. An affirmative confirmation that documents the person was present rather than assumes the person was present is essential.</p> <p>The provider must retain staff time sheets (including ESignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <p>Exceptions include Therapeutic Leave which requires start and end times on the day of absence and return, and Medical Leave which requires admission and discharge date from medical center.</p>	<p>Progress Notes In accordance with 55 PA Code, Chapter 51.16, the Provider must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed <p>Progress notes must document substantive issues that impact the participant’s</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
W7070	Supplemental Habilitation 1:1,	15	In addition to residential habilitation	Progress Notes

<p>W7084 W7085 W7086</p>	<p>2:1 Additional Individual Staffing 1:1, 2:1</p>	<p>minutes</p>	<p>billing documentation requirements, service notes must include</p> <ul style="list-style-type: none"> - Start and end times for supplemental/additional staff; and - Signature of the person providing the service (eSignature is allowed). <p>A service note must be included for each continuous span of 15 minute units that describes how the service performed relates to the reason the service was authorized.</p>	<p>The progress note completed for Residential Habilitation should address progress in Supplemental Habilitation.</p>
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Respite

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7247 W7248 W7250 W7251 W7252 W7255 W7256 W7258 W7264 W7265 W7266	Respite--In Home and out of Home Unlicensed– Basic; Levels 1, 2, 3; Participant Directed Services (PDS); U4; and Enhanced Respite--Unlicensed Out of home Basic; Level 1 and 2; PDS;U2; Level 2 Enhanced Support ¹ and PDS; and U4 PDS.	One day	<ul style="list-style-type: none"> - Documentation must include start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); and - Signature of person providing the service (eSignature is allowed), degree/title, and title for enhanced service levels only. <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p>	<p>No monthly progress note is required.</p> <p>For each consecutive block of units, documentation is required for substantive issues that impact the participant’s</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine.
W8000 W8001 W8002 W8003 W8004 W8010 W8011 W8012 W8014	Respite--In Home and out of home unlicensed– Basic; levels 1, 2, and 3; PDS; U4; and Enhanced Respite--Unlicensed out of home Basic; Levels 1, 2, and 3; PDS; and U4.	15 minutes	<p>Service Note</p> <p>A service note must be included for each continuous span of 15 minute units (or each day unit) that document caregiver relief. Notes should be written by the person providing the respite and not by the caregiver to whom relief is being provided.</p>	<p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
W7251 W7264 W7266	Respite-In Home Unlicensed 24 Hours (Level 2 Enhanced Support)-Day-Modifiers TD, TD PDS, U4 PDS, TE, TE U4 Respite-In Home Unlicensed (Level 2 Enhanced Support), 3 Enhanced Support, TD, TD	One day 15 minutes	<p><u>Same as above:</u></p> <ul style="list-style-type: none"> - Documentation must include start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); and - Signature of person providing the service (eSignature is allowed), degree/license, and title 	<p>No monthly progress note is required.</p> <p>For each consecutive block of units, documentation is required for substantive issues that impact the participant’s</p>

¹ The use of enhanced levels of service is based on the individual’s assessed need, not the service worker’s personal qualifications. The fact that the service worker possesses a degree is not justification to use the enhanced level of service.

	PDS, TE		<p>for enhanced service levels and nursing only.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <p>Service Note A service note must be included for each continuous span of 15 minute units (or each day unit) that document caregiver relief. Notes should be written by the person providing the respite and not by the caregiver to whom relief is being provided.</p> <p><i>In addition:</i></p> <ul style="list-style-type: none"> - License Type – RN or LPN - Nurse Title <p>A service note must be included for each continuous span of 15 minute units (or each day unit) that describes what the nurse did to address any health/medical interventions. Based upon the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.</p>	<ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
W7259 W7260 W7262 W7263 W7299 W7300 W9591 W9593	<p>Respite-Licensed Out-of-Home</p> <p>Service Levels: Basic; Levels 1, 2; 2 Enhanced Support, 3, 3 Enhanced Support</p> <p>Respite in Child Residential Services (3800)</p>	One day	<p><i>Same as above:</i></p> <ul style="list-style-type: none"> - Documentation must include start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); and - Signature of person providing the service (eSignature is allowed), qualification, and title for enhanced service levels only. 	<p>No monthly progress note required</p> <p>For each consecutive block of units documentation is required for substantive issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health;

W9594	<p>Respite in Family Living Home (Licensed under 55 PA. Code 6500)</p> <p>Respite in Community Homes (Licensed under Pa. Code Chapter 6400)</p>		<p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <p>Service Note A service note must be included for each continuous span of 15 minute units (or each day unit) that document caregiver relief. Notes should be written by the person providing the respite and not by the caregiver to whom relief is being provided.</p>	<ul style="list-style-type: none"> - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
W7267 W7268 W7270	Respite-Licensed Out-of-Home Basic; Levels 1, 2	15 minutes	<p><i>In addition:</i> If the service is provided in a 6400 home, the provider must have staff time sheets that demonstrate the staffing ratios authorized in the ISP have been provided.</p> <p>If the service is provided in a 6500 home, the provider must document start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); signature of the person providing the service (eSignature is allowed); and the documentation must indicate how</p> <ul style="list-style-type: none"> - staffing ratios authorized in the ISP have been met; - and licensed and approved program capacity is not exceeded. 	
W7259 W7260 W7262	<p>Respite-Emergency Licensed under 55 Pa. Code Chapter 6400 Home Basic, Level 1</p> <p>Respite-Emergency Licensed Out of Home Basic U2, Level 1 and 2 U2</p>	One day	<p><i>Same as above :</i> Documentation must include start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); and signature of person providing the service (eSignature is allowed).</p>	<p>No monthly progress note required</p> <p>For each consecutive block of units documentation is required for substantive issues that impact</p>

		<p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio specified in the ISP.</p> <p>Service Note A service note must be included for each continuous span of 15 minute units (or each day unit) that document caregiver relief. Notes should be written by the person providing the respite and not by the caregiver to whom relief is being provided.</p> <p>If the service is provided in a 6400 home, the provider must have staff time sheets that demonstrate the staffing ratios authorized in the ISP have been provided.</p> <p>If the service is provided in a 6500 home, the provider must document start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hour requirement); signature of the person providing the service (eSignature is allowed); and the documentation must indicate how</p> <ul style="list-style-type: none"> - staffing ratios authorized in the ISP have been met; and - licensed and approved program capacity is not exceeded. <p><i>In addition:</i> There is a process to request approval in an emergency situation to provide respite beyond program capacity. Confirmation of ODP approval for these situations must be maintained.</p>	<p>the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
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Day Habilitation

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7057 W7058 W7059 W7060 W7061 W7068 W7069	Home and Community Habilitation Unlicensed Basic; Levels 1, 2, 3, and 4; PDS; U4 ; and Enhanced Support.	15 minutes	<p>Documentation must include start and end time(s); signature of person providing the service (eSignature is allowed); and degree/license and title for enhanced service levels only.</p> <p>1:1 staffing ratios require time sheets with start and end times for the 1:1 staff.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p> <p>A service note must be included for each continuous span of 15 minute units to describe service activities. Notes must be maintained for each date of service billed. The requirement can be achieved by using a checklist to indicate the assistance, supports, and/or guidance provided by direct support staff to the participant which may include</p> <ul style="list-style-type: none"> - Grooming, dressing and hygiene activities including clothing care; - Maintaining health and wellness through general exercise, completing recommended therapeutic activities, taking medications; - Meal planning and preparation; - Scheduling/attending medical appointments; - Managing emotional wellness through activities, counseling, implementing behavioral support interventions; 	<p>Progress Notes In accordance with 55 PA Code, Chapter 51.16, a monthly progress note is used to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant's assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>

			<ul style="list-style-type: none"> - Participating in Person Centered Planning including pre-planning; - Making choices and decisions including identifying and evaluating options; - Shopping in the community or online to purchase items for the home, for personal use, gifts, etc.; - Managing the home including maintenance, cleaning, doing laundry; - Managing personal finances including budgeting and banking; - Communicating and maintaining relationships with family, friends, co-workers and others through personal visits, phone contact, internet, etc.; - Traveling through transportation (within 10 miles) and using any form of transportation; - Developing/maintaining relationships in the community (neighbors, community members and groups, associations, etc.); - Exercising rights and fulfilling civic duty through participation in events, volunteering with civic groups, and voting; - Developing personal interests and personal growth activities (e.g. hobbies, educational programs, cooking classes, art); - Participating in community activities that are personally fulfilling and enjoyable (e.g. faith-based activities, movies, vacations, clubs, etc.); - Identifying risk and respond to events through reporting incidents and using advocacy and protective services; and - Companion care (at least half of time must be spent providing Community Habilitation 	
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			<p>supports – include a statement that affirms this).</p> <p>Considerations in the calculation of the percentage of Companion Care include</p> <ul style="list-style-type: none"> - Supervision of participants during awake hours for non-habilitative activities when necessary to ensure the participant’s safety; - If Companion Care is provided overnight, indicate which of the following tasks were completed. <ul style="list-style-type: none"> o Monitor vital statistics; o Positioning; o Range of motion; o Medication administration; o Application of treatments; o Monitoring seizures; o Maintaining essential devices; and o Crisis intervention. 	
W7061	Home and Community Habilitation Unlicensed Level 3 Enhanced Support,TD U4, PDS, TE, TE PDS, and TE U4 PDS.		<p><u>Same as above</u> :</p> <ul style="list-style-type: none"> - Documentation must include start and end time(s); signature of person providing the service (eSignature is allowed); and degree/license and title for enhanced staffing levels and nursing only. <p>1:1 staffing ratios require time sheets with start and end times for the 1:1 staff.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p>	<p>Progress Notes</p> <p>In accordance with Pa. Code 51.16, a monthly progress note is used to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is require for substantive</p>

		<p>A service note must be included for each continuous span of 15 minute units to describe service activities. Notes must be maintained for each date of service billed. The requirement can be achieved by using a checklist to indicate the assistance, supports and/or guidance provided to the participant, which may include</p> <ul style="list-style-type: none"> - Grooming, dressing and hygiene activities including clothing care; - Maintaining health and wellness through general exercise, completing recommended therapeutic activities, taking medications; - Meal planning and preparation; - Scheduling/attending medical appointments; - Managing emotional wellness through activities, counseling, implementing behavioral support interventions; - Participating in ISP including pre-planning; - Making choices and decisions including identifying and evaluating options; - Shopping in the community or online to purchase items for the home, for personal use, gifts, etc.; - Managing the home including maintenance, cleaning, doing laundry; - Managing personal finances including budgeting and banking; - Communicating and maintaining relationships with family, friends, co-workers and others through personal visits, phone contact, internet, etc.; - Traveling through transportation (within 10 miles) and using any form of transportation; 	<p>issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
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			<ul style="list-style-type: none"> - Developing/maintaining relationships in the community (neighbors, community members and groups, associations, etc.); - Exercising rights and fulfill civic duty through participation in events, volunteering with civic groups, and voting; - Developing personal interests and personal growth activities (e.g. hobbies, educational programs, cooking classes, art); - Participating in community activities that are personally fulfilling and enjoyable (e.g. faith-based activities, movies, vacations, clubs, etc.); - Identifying risk and respond to events through reporting incidents and using advocacy and protective services; and - Companion care (at least half of time must be spent providing Community Habilitation supports – consider a statement that affirms this). <p>Considerations in the calculation of the percentage of Companion Care include</p> <ul style="list-style-type: none"> - Supervision of participants during awake hours for non-habilitative activities when necessary to ensure the participant’s safety. - If Companion Care is provided overnight indicate which of the following tasks were completed. <ul style="list-style-type: none"> ○ Monitor vital statistics; ○ Positioning; ○ Range of motion; ○ Medication administration; ○ Application of treatments; ○ Monitoring seizures; ○ Maintaining essential devices; and 	
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			<ul style="list-style-type: none"> ○ Crisis intervention. <p><u>In Addition:</u></p> <ul style="list-style-type: none"> - License Type – RN or LPN (research) - Nurse Title <p>A service note must be included for each continuous span of 15 minute units or each day unit that describes what the nurse did to address any health/medical interventions performed by the nurse. Based upon the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.</p>	
W7035 W7072 W7073 W7074 W7075 W7076	Licensed Day Habilitation (2380) Base; Levels 1, 2, 3, and 4; Enhanced Support		<p>An attendance roster with participant start and end time(s) is required to include accommodation of multiple in and out times.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio and, where applicable, enhanced staffing, authorized in the ISP and billed has been provided.</p>	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code, Chapter 51.16(d) and 55 Pa. Code, Chapter 2380.33, the Program Specialist must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant’s:</p> <ul style="list-style-type: none"> - Health; - Safety;

				<ul style="list-style-type: none"> - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
W7076	Licensed Day Habilitation (Licensed under 55 Pa. Code Chapter 2380 - Level 3 Enhanced Support)-15 Min-TE		<p><u>Same as above:</u> An attendance roster with participant start and end time(s) is required to include accommodation of multiple in and out times.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio and, where applicable, enhanced staffing, authorized in the ISP and billed has been provided.</p> <p><u>In Addition:</u></p> <ul style="list-style-type: none"> - License Type – RN or LPN (research) - Nurse Title <p>A service note must be included for each continuous span of 15 minute units or each day unit that describes what the nurse did to address any health/medical interventions. Based upon the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.</p> <p>A service note must be included for each continuous span of 15 minute units or each day unit that describes what the nurse did to address</p>	<p><u>Same as above:</u></p> <p>Progress Notes</p> <p>In accordance with 55 PA Code, Chapter 51.16(d) and 55 PA Code, Chapter 2380.33, the Program Specialist must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant’s:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as</p>

			any health/medical interventions performed by the nurse. Based upon the diagnosis of the participant, the nurse should document activities around assessment, intervention, response, and any planned next steps.	required by Pa. code, including, for example but not limited to reportable events.
W7094	Licensed Day Habilitation, Older Adult Daily Living Centers		<p>An attendance roster with participant start and end time(s) is required to include accommodation of multiple in and out times.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio specified in the ISP.</p>	<p>Progress Notes</p> <p>In accordance with 55 PA Code, Chapter 51.16 and 6 PA Code, Chapter 11.109, the Provider must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as indicated by the participant's medical diagnosis and as specified in the ISP and the care plan; - Whether the service is meeting the participant's assessed needs and preferences; - Whether there is progress toward ISP and Care Plan specified goals and outcomes; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example</p>

				but not limited to reportable events.
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Day/Home Supports

Code	Service	Unit	Required Information For Claim Record Billing	Other Required Documentation
W1724 W1725 W1726 W1727	Companion Services Basic Staff Support; Levels 1, 2, and 3; PDS; U4 PDS	15 minutes	<p>Documentation must include start and end time(s) and signature of the person providing the service (eSignature is allowed).</p> <p>1:1 staffing ratios require time sheets with start and end times for the 1:1 staff.</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio specified in the ISP.</p> <p>W1727 is the only companion service code available in PDS.</p> <p>A service note must be included for each continuous span of 15 minute units to describe service activities. The requirement can be achieved by using a checklist to indicate the assistance, supports and/or guidance provided to the participant, which may include</p> <ul style="list-style-type: none"> - Supervision participants during awake hours for non-habilitative activities when necessary to ensure the participants safety; - Supervision during asleep hours in which non-medical or non-habilitative care is needed to protect the safety of the participant with intellectual disabilities; - Supervision and assistance during awake hours with daily living activities, including grooming, health care, household care, meal preparation and planning, and socialization; and 	<p>Progress Notes</p> <p>In accordance with 55 PA Code 51.16, a monthly progress note should focuses on the health, safety, and supervision needs of the participant to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant’s:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon</p>

			<ul style="list-style-type: none"> - For agency based providers only, transportation services necessary to enable the participant to participate in the Companion Service. 	occurrence as required by Pa. code, including, for example but not limited to reportable events.
W7283	Homemaker/Chore, Permanent, Temporary and PDS and U4 PDS	One hour	<p>Documentation must include start and end time(s); and signature of person providing the service (eSignature is allowed).</p> <p>For non-PDS, the participant or family should sign to confirm receipt of services, which might be a signature on the homemaker/chore time sheet.</p> <p>For PDS, confirmation from a Managing Employer or Common Law Employer that the work was completed is required.</p> <p>A service note must be included for each continuous span of 15 minute units to describe service activities. The requirement can be achieved by using a checklist to indicate tasks performed, which may include:</p> <ul style="list-style-type: none"> - Cleaning including washing floors, windows, and walls; - Laundry; - Meal preparation; - Tacking down loose rugs and tiles; - Moving heavy items of furniture in order to provide safe access and egress; - Ice, snow, and/or leaf removal; and yard maintenance; and - Other general tasks to maintain the home in a clean, sanitary and safe condition (describe). 	No progress note is required. The signature from the participant/family/managing employer serves to validate that the service provided is adequate.

Pre-Vocational

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7087 W7088 W7089 W7090 W7091 W7092	Prevocational Services (2390) Base; Levels 1, 2, 3, and 4; Enhanced Support	15 minutes	<p>An attendance roster with participant start and end time(s) to include accommodation of multiple in and out times.</p> <p>1:1 staffing ratios require time sheets with start and end times for the 1:1 staff</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate that staffing ratio and, where applicable, enhanced staffing level, authorized in the ISP and billed has been provided.</p>	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code, Chapter 51.16 and 55 Pa. Code, Chapter 2390.33, the Program Specialist must use a monthly progress note to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant's assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including for example but not limited to reportable events.</p>

Employment

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7237 W7239 W7241 W7245	Transitional Work Services Base; Levels 1, 2, and 3	15 minutes	<p>An attendance roster with participant start and end time(s) to include accommodation of multiple in and out times.</p> <p>1:1 staffing ratios require time sheets with start and end times for the 1:1 staff</p> <p>The provider must retain staff time sheets (including eSignatures or electronic time sheets) that demonstrate the staffing ratio specified in the ISP.</p>	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code, Chapter 51.13, a monthly progress note is used to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant's assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant's:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events</p>

<p>W7235</p>	<p>Supported Employment and PDS and U4 PDS</p>	<p>Documentation must include start and end time(s) and signature of person providing the service (eSignature is allowed).</p> <p>Service note must specify activity as either job finding or job support.</p> <p>Service note must specify the activity to determine that only billable activities are being claimed.</p> <p>A service note must be included for each continuous span of 15 minute units to describe service activities. The note must specify if activities are either “job finding” or “job support” and describe service activities. A checklist may be used to meet this requirement which may include</p> <p>Job finding</p> <ul style="list-style-type: none"> - Interview assistance, employer outreach and orientation; - Resume preparation; - Job searching, and preparation for job tasks; - Participation in individual planning for employment; - Development of job seeking skills; - Development of customer-specific job skills; - Job analysis; - Support to learn job tasks; 	<p>Progress Notes</p> <p>In accordance with 55 Pa. Code, Chapter 51.16, a monthly progress note is used to determine</p> <ul style="list-style-type: none"> - Whether the service is being provided as specified in the ISP; - Whether the service is meeting the participant’s assessed needs and preferences; - Whether there is progress toward ISP specified outcomes and actions; and - When there is an identified lack of progress, how the lack of progress will be addressed. <p>Documentation is required for substantive issues that impact the participant’s:</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>
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		<ul style="list-style-type: none"> - Consultation with the Office of Vocational Rehabilitation (OVR), benefits counseling agencies, and provider networks under Ticket to Work on behalf of a participant; - Assistance in beginning a business; - Outreach with prospective employers on behalf of the participant including consultation on tax advantages and other benefits; and - Other tasks that support the participant in securing competitive employment (Describe). <p>Job support</p> <ul style="list-style-type: none"> - Training the participant receiving the service on job assignments; - Periodic follow-up or ongoing support with participants and their employers; - Individual planning for employment; - Direct intervention with an employer; - Employment related personal skills instruction; - Support to relearn job tasks; - Training to assist participants in using transportation to and from work; - Worksite orientation; - Job aide development; - Coordination of accommodations; - Ensuring assistive technology is utilized as specified in the plan; 	
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			<ul style="list-style-type: none">- Maintenance of appropriate work and interpersonal behaviors on the job;- Follow-along services at the work site after OVR funded services are discontinued;- Technical assistance and instruction for the participant's co-workers that will enable peer support; and- Other tasks that support the participant in maintaining or increasing hours/wages in competitive employment (Describe).	
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Vendor

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
T2028 T2029 W6089	Assistive Technology--Non-Medical and Medical Specialized Supplies	Outcome	Invoice that includes an itemized list of provided/delivered goods and/or services is required.	<p>No progress note required.</p> <p>Vendor pay/Non PDS (receiving payments through an Organized Health Care Delivery System Provider (OHCDs)) – Invoice must be provided to the Supports Coordination Organization (SCO) or Administrative Entity (AE).</p> <p>Vendor pay/PDS (receiving payments through an Agency With Choice (AWC) or a Vendor Fiscal/Employer Agent (VF/EA).</p> <p>AWC- Invoice must be provided to the Managing Employer and kept in the participant’s record by the AWC.</p> <p>VF/EA- Invoice must be provided to the Common Law Employer and provided to VF/EA. Both parties must retain in participant’s record.</p>
W7278 W7279	Home and Vehicle Accessibility and Adaptations	Outcome	<p>Itemized list of provided/delivered goods and/or services is required.</p> <ul style="list-style-type: none"> - Contractor bids to include cost detail for products and services. - For home modifications as appropriate-- Contractor bids to include before and after floor plans. 	<p>No progress note required.</p> <ul style="list-style-type: none"> • Vendor pay/Non PDS (receiving payments through OHCDs) – Itemized list must be provided to the SCO or AE. • Vendor pay/PDS (receiving payments through an AWC or a VF/EA) <p>AWC- Itemized list must be provided to the Managing Employer and kept in the participant’s record by the AWC.</p> <p>VF/EA- Itemized list must be provided to the</p>

				Common Law Employer and provided to VF/EA. Both parties must retain in participant's record.
W7285	Respite Camp	One Day	Invoice that includes participant attendance including start and end time(s) in a 24 hour period (accommodate multiple in and out to calculate more than 16 hours) The invoice should be on authorized letterhead or include signature of camp director or designee.	No Progress note required.
W7286	Respite Day Camp	15 minutes		<p>If a direct provider (enrolled as an intellectual disability provider of waiver services), the camp shall document substantive issues that impact the participant's</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p> <ul style="list-style-type: none"> • Vendor pay/Non PDS (receiving payments through OHCDs) - This documentation must be provided to SCO or AE. • Vendor pay / PDS (receiving payments through an AWC or a VF/EA AWC- This documentation must be provided to the Managing Employer and kept in the participant's record by the AWC. • VF/EA--, The documentation should be provided to the Common Law Employer and retained in participant's record.
W7284	Education Support Services	Outcome-based	Invoice on authorized letterhead or signature of service provider and documentation of progress toward	<p>No progress note required.</p> <p>If Direct providers (enrolled as an ID provider</p>

			<p>outcome such as a report card.</p>	<p>of waiver services) shall provide a curriculum summary or course catalogue.</p> <p>The provider shall document substantive issues that impact the participant’s</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events</p> <ul style="list-style-type: none"> • Vendor pay/Non PDS (receiving payments through an OHCDs) – Documentation list above must be provided to the SCO/AE • Vendor pay/PDS (receiving payments through an AWC or a V/FEA) – <ul style="list-style-type: none"> AWC- Documentation must be provided to the Managing Employer and kept in the participant’s record by the AWC. VF/EA- Documentation must be provided to the Common Law Employer and be retained in participant’s record.
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Case Management

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7210	Supports Coordination (SC)	15 minutes	<p>SC service note in Home and Community Services Information System (HCSIS) to indicate who entered the note (and his/her role, if not the SC).</p> <p>Contact summary to indicate the nature of the contact including</p> <ul style="list-style-type: none"> - Location of services; - Coordinate services; and - Monitoring of services. <p>Indicate amount of service (units) and if service is billable/non-billable</p>	<p>Summary information to be maintained in HCSIS at the required waiver monitoring frequency to include</p> <ul style="list-style-type: none"> - Current and outstanding issues; - Content / impact of services being billed; - Progress (or lack thereof) toward outcomes and actions ; and - Required follow up.

Transportation

Code	Service	Unit	Required Information for Claim Record Billing	Other Required Documentation
W7271	Transportation-Mile	Mile	Documentation including mileage log with date, from/to address, total miles and purpose of trip, and driver's signature to document that mileage was provided for activities identified in the ISP.	<p>No progress note required.</p> <p>When appropriate, the vendor shall provide documentation regarding substantive issues that impact the participant's</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p> <p>Vendors receiving payments from an OHCDs should provide this documentation to the participant's SCO</p> <ul style="list-style-type: none"> • Vendors receiving payments from an AWC should provide this documentation to the Managing Employer and be retained in the participant's record. • Vendors receiving payments from a VF/EA should provide this documentation to the Common Law Employer and retained in the participant's record.
W7272	Transportation-Public Vendor	Outcome	Receipt from purchase is required.	No progress note required.

				Documentation of delivery to the person is required—note that it was either delivered in person or other delivery confirmation was used.
W7274 W7275 W7276	Transportation Zone 1, 2, and 3 -Trip and Vendor	Trip	<p>An attendance roster with indication of trip and signature of the transportation coordinator, driver, or aide is required.</p> <p>If more than six riders are listed on the roster for the same time period, there must be a time sheet to document the presence of an aide.</p>	<p>No progress note required.</p> <p>When appropriate, provider must provide documentation regarding substantive issues that impact the participant's</p> <ul style="list-style-type: none"> - Health; - Safety; - Preferences; - Priorities; and - Routine. <p>Documentation needed upon occurrence as required by Pa. code, including, for example but not limited to reportable events.</p>

Supports for Participant Direction

Code	Service	Unit	Required Information for Claim Record Billing Requirement	Other Required Documentation
W7096	Supports Broker Services	15 minutes	<p>Documentation must include start and end time(s) and signature of person providing the service (eSignature is allowed).</p> <p>A service note must be included for each continuous span of 15 minute units to describe service activities. The requirement can be achieved by using a checklist to indicate the assistance provided to the participant, which may include</p> <ul style="list-style-type: none"> - Explaining and providing support in completing employer-or managing employer related paperwork; - Participating in Financial Management Services (FMS) orientation and other necessary trainings and interactions with the FMS provider; - Developing effective recruiting and hiring techniques; - Determining pay rates for workers; - Providing or arranging for worker training; - Developing worker schedules; - Developing, implementing and modifying a back-up plan for services, staffing for emergencies and/or worker absences; - Scheduling paid and unpaid supports; - Developing effective management and supervision techniques such as conflict resolution; - Developing proper procedures for termination of workers in the VF/EA FMS option or communication with the AWC regarding the desire for removal of the workers from working with the participant in the AWC FMS option; - Reviewing of workplace safety issues and strategies for effective management of workplace injury prevention; - Assisting the participant or their designated surrogate in 	<p>Progress Notes</p> <p>Progress notes should include a detailed summary of</p> <ul style="list-style-type: none"> - Current and outstanding issues; - Content/impact of services being billed; - Progress (or lack thereof) toward outcomes and actions; and - Required follow up. <p>The note shall be at least monthly in any calendar month the service is provided.</p>

			<p>understanding and/or fulfilling the responsibilities outlined in the Common Law Employer Agreement form and the Managing Employer Agreement form;</p> <ul style="list-style-type: none"> - Facilitating a support group that helps to meet the participant's self-direction needs; - Expanding and coordinating informal, unpaid resources and networks within the community to support success with participant direction; - Identifying areas of support that will promote success with self-direction and independence and share the information with the team and SC for inclusion in the ISPs; - Identifying and communicating any proposed modifications to the participant's ISP; - Advising and assisting with the development of procedures to monitor expenditures and utilization of services; - Complying with the standards, regulations, policies and the waiver requirements related to self-direction; - Advising in problem-solving, decision-making, and achieving desired personal and assessed outcomes related to the participant directed services; and - When applicable, securing a new surrogate and responding to notices for corrective action from the FMS, SC, AE or ODP. 	
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Billing Guidance

Units of Service	Each procedure code has been assigned a service unit that is used for rate development and billing. Each service unit equals the amount of time that a provider must render the service in order to submit a claim to be paid for the service.
15 Minute Unit of Service	The 15 minute unit of service will be comprised of 15 minutes of continuous or non-continuous service within the same calendar day. The full 15 minutes of service does not need to be provided consecutively, but must be rendered within the same calendar day in order to be billed.
Day Unit of Service:	<p>The day service unit is defined in each actual service definition to which it relates. A provider must meet the requirements of the definition contained in the narrative in order to submit a claim for the rendered unit of service.</p> <p>A day is defined as a period of a minimum of 12 hours of non-continuous care rendered by a residential habilitation provider within a 24-hour period beginning at 12:00 a.m. and ending at 11:59 p.m. The exception to this rule, effective July 1, 2015, occurs when an individual is admitted to a hospital or nursing facility. When this occurs the residential habilitation provider may not bill for the day the individual is admitted regardless of how many hours of care the residential habilitation provider has rendered during the 24-hour period. When an individual is discharged from a hospital or nursing facility the residential habilitation provider may bill for the discharge day of service regardless of how many hours of care the residential habilitation provider has rendered during the 24-hour period.</p>
Hour Unit of Service	The hour unit of service will be comprised of 60 minutes of continuous or non-continuous service within the same calendar day. This means the full 60 minutes of service does not need to be provided consecutively, but must be rendered within the same calendar day in order for a unit of service to be billed.
Outcome-Based Unit	A service unit that is outcome based is tied to the actual cost of a purchased good.
Per Mile Unit of Service	Each unit of service equals one mile.
Per Trip Unit	A trip is either transportation to a service from an individual's home or from the service location to the individual's home. The Transportation Trip provider agency decides the geographical area that equals the per trip service unit.

Modifiers:

Some services have unique circumstances that require modifiers to be used that identify individual services and account for differences in service delivery regulations or methods specific to different service settings. The modifiers may be used to inform the PROMISE™ system of critical information needed for claims processing.

The following is a list of modifiers that are used in combination with specific procedure codes as identified throughout this document. When a provider submits a claim for services, the procedure code and modifier combination in PROMISE™ must match exactly with the procedure code and modifier combination in HCSIS.

TD	Services rendered by a RN.
TE	Services rendered by a LPN.
GP	Services rendered by a Physical Therapist.
GO	Services rendered by an Occupational Therapist.
GN	Services rendered by a Speech and Language Therapist
SE	Assistive Technology.
UA	Semi-Independent Living (Licensed under 55 Pa. Code Chapter 6400 homes only).
UA	Nontraditional day program for an individual who resides in a residential habilitation setting. Used with Home and Community Habilitation (Unlicensed) procedure code W7060 only.
U1	Enhanced Communication Service. Services rendered by staff proficient in Sign Language for individuals enrolled in the Consolidated Waiver who have been assessed as needing this service. ODP must approve the modifier prior to a contract being created in HCSIS for the service with the U1 modifier. U2--One-time vendor payment for Respite-Camp paid by an OHCDs.
U2--	Emergency Respite rendered in a waiver-funded licensed under 55 Pa. Code Chapter 6400 home in which ODP permitted the provision of respite services beyond the approved program capacity of the home.
U2	Used with transportation trip codes W7274, W7275 and W7276 to indicate the required use of an aide if the provider is transporting more than 6 individuals.
U4	Individual-Directed Services provided that do not include a benefit allowance for the SSWs. This modifier is only used by AWC/FMS providers

ⁱ The following elements must be present for each claim of FFP for ALL service categories: 1) Participant is Medicaid eligible; 2) the service is authorized in the person centered plan; 3) provider is qualified and qualifications have been verified and documented; and 4) each claim for service includes *date of service; name of recipient; Medicaid identification number, name of provider agency and person providing the service; nature, extent or units of service; and the place of service.*

DRAFT