

Waiver Covered Services Billing Manual

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*** Children’s Mental Health Waiver information can be found in the CMS 1500 Provider Manual.**

Section 1 - Long Term Care – Home and Community Based Waiver Services (HCBS)

The purpose of the Long Term Care (LTC) Home and Community Based Waiver (HCBS) is to offer an opportunity for additional services in the home to people who are EqualityCare eligible and functionally disabled who, but for the provision of the services, would require the level of care provided by a nursing facility. These services are available to persons 19 years and above. The LTC/HCBS Waiver serves a limited number of people statewide and has a monetary cap each month. There may not be providers for all services in all communities. The Waiver operates under a case management system. Each client has a Plan of Care prepared by a qualified Case Manager and a budget of the services required, which is approved by the Aging Division.

Referrals to the LTC/HCBS Waiver are made to the local Public Health Department. The Public Health Nurse does a functional assessment (LT101), which is also used to determine level of care for nursing facility admission. If a client has thirteen or more points, he/she has the choice of nursing facility admission or waiver services, if there are empty slots available. The client is then referred to the Department of Family Services for determination of financial eligibility, which is determined using the same guidelines as nursing facility eligibility. Waiver services cannot be provided to clients while they are inpatients of a hospital or nursing facility, or on another waiver. There may be a waiting list for LTC/HCBS services.

The services available are:

- **Case Management:** The Case Manager is responsible for the development, implementation and monitoring of the Plan of Care for each individual client. A reassessment of the level of care (LT101) and a renewal Plan of Care are required every six months. Case Managers are required to do at least one face-to-face visit a month and to maintain an LTC/HCBS Waiver record on each client. Case managers for the Consumer Directed Care are called Care Coordinators.
- **Personal Care:** A Certified Nurse's Aid (employed by a Home Health Agency that meets the standards to be a LTC/HCBS Waiver Provider) can be assigned to care for the client in the home, providing help with activities of daily living such as bathing, dressing and grooming, meal preparation, grocery shopping and household chores which are essential to the health and welfare of the client.
 - **Consumer Directed Care:** This Personal Care option will allow LTC/HCBS clients, who are capable of directing their own care, to recruit, hire, train, schedule, evaluate and terminate their own attendants. These attendants are called Self-Help Assistants. A fiscal agent will issue their checks based on payroll records provided by the Self-Help Assistant and the consumer. Each consumer will have a Care Coordinator to prepare the Plan of Care for agency approval.

Who is eligible for this option? Those who are interested in participating in Consumer-Directed Care must be on the LTC/HCBS Waiver and be capable of directing their own care.

Who are the caregivers? The consumers choose their own caregivers. Family members are allowed to be caregivers in this program, except for a spouse caring for a spouse or a parent caring for a minor child. The consumer must find and select their own caregivers and have a backup plan in case caregivers fail to show up for a scheduled appointment.

What services are allowed? The Self-Help Assistant's duties may vary depending on the needs and requirements of each consumer. Consumer needs and requirements are determined by the Care Coordinator and documented on the Consumer Profile. The Self-Help Assistant services involve direct assistance and may include the following:

- 1) Assistance with activities of daily living and/or personal hygiene. These activities might include, but are not limited to: dressing, bathing, grooming, feeding, routine hair and skin care, toileting, transferring, walking, exercising and assistance with medications which are ordinarily self-administered.
- 2) Assistance with health maintenance tasks including urinary system management and bowel program.
- 3) Assistance with meal preparation. Examples of meal preparation activities include, but are not limited to, menu planning, storing, preparing and serving food.
- 4) Household tasks and escort services must be provided only in conjunction with direct personal assistance as described above and must be directly related to a consumer's disability.

Household tasks include assistance with activities related to housekeeping that are essential to maintaining the consumer's health and safety in the home. Examples of household tasks include, but are not limited to: change bed linens, light housecleaning, laundering, washing dishes and shopping. Household tasks shall not include basic homemaker services that maintain an entire household or family. When a consumer lives with a family, it is expected that the family will provide most household task services. Household tasks may not exceed one-third of the total personal assistance hours. Household tasks may not be provided if no other personal assistance needs exist.

Escort services includes accompanying and personally assisting consumers on trips to obtain medical diagnosis or treatment or shopping for items essential to the consumer's health care and nutritional needs.

Escort services are available only to those consumers who require personal assistance services en route to or at the destination when a family member or caretaker is unable to accompany them.

Excluded Services: Self-Help Assistant services do not include services, which maintain an entire household or family, or are not necessary to the health and welfare of the consumer. These include, but are not limited to the following:

- 1) Cleaning floors and furniture in areas consumers do not use or occupy.
- 2) Laundering clothing or bedding the consumer does not use.
- 3) Shopping for groceries or household items consumers do not need for health and nutritional needs. Self-Help Assistants may shop for items consumers need but are used by the rest of the household.
- 4) Babysitting or friendly visiting.
- 5) Maintenance of pets except in the case where the animal is a certified service animal.
- 6) Home and outside maintenance. For example, snow removal, window washing and woodcutting.

Who do you contact? LTC/HCBS Waiver clients who are interested in Consumer-Directed Care should contact their Case Manager, the Independent Living Specialist for their area, or the Aging Division.

- **Respite:** Respite Care is provided in the home for a short period of time to relieve a regular caregiver. If the care is provided in the home, a Certified Nurse's Aide must provide it.
- **Adult Day Care:** A structured program in a protective setting that provides a variety of health, social and related support services for all or part of the day, but less than 24 hour care.
- **Non-Medical Transportation:** Transportation can be provided to enable LTC/HCBS Waiver clients to gain access to waiver and other community services and resources required by the Plan of Care and help to prevent institutionalization. Transportation as an LTC/HCBS Waiver service is used when transportation cannot be arranged by any other means.
- **Personal Emergency Response System:** An electronic alarm system, programmed through the phone, which enables certain high-risk clients to summon help in the case of an emergency. PERS is intended for those individuals who live alone, or who are alone for a significant portion of the day. The LTC/HCBS Waiver allows for the installation for the system and a monthly fee.
- **Home Delivered Meals:** This service allows for one or two meals a day to be delivered to the client's home or Adult Day Care Facility.
- **Skilled Nursing:** Services that are within the scope of the Wyoming Nurse Practice Act that will prevent or delay the institutionalization of a client. The services available under the Skilled Nursing waiver service are any of the tasks that require licensed personnel to perform that are not covered under the Home Health benefit or are not available because the client does not meet Home Health criteria. These services include, but are not limited to, filling medication boxes, filling Insulin syringes, doing venipunctures, giving injections, doing foot care, and doing catheterizations and catheter irrigations.

All of these services will not be given to all clients. They will receive only those services that the Case Manager and the multi-disciplinary team (which must include the client and/or member of their family) decide are needed, and are approved by the Aging Division, and are within the monthly monetary cap.

Due to HIPAA Compliance standards, EqualityCare has eliminated local codes and replaced them with standard CPT-4 codes. When billing on the CMS-1500, the appropriate ICD-9 diagnosis codes must be used.

NOTE: THE CODES AND MODIFIERS ARE SUBJECT CHANGE

Local Code	CPT Code	Modifier(s)	Description
W6001	T2024		Service Assessment/Plan of Care Development (Case Management)
W6002	T2041		Supports Brokerage, Self Directed (Self Help Assistant)
W6003	T1019		Personal Care Services
W6005	S5150		Unskilled Respite Care
W6007	S5170		Home Delivered Meals
W6008	S9123		Nursing Care, By RN (Skilled Nursing)
W6009	S5160		Emergency Response System (Installation)
W6010	S5161		Emergency Response System (Monthly)
W6011	T2003		Non Medical Transportation
W6012	T2024	TF	Service assessment/Plan of Care Development Subsequent (Care Coordinator)
W6013	S5100		Day Care Adult

Modifier	Description
TF	Intermediate Level of Care

Section 2 - Assisted Living Facility Waiver Services

The Assisted Living Facility (ALF) Waiver offers the client, 19 years of age and above, who meets the functional and financial eligibility criteria for nursing home care the ability to have their care provided in an assisted living facility. Each client must pay their room and board fee and EqualityCare funds the care required within the facility at a daily rate determined by the LT101 score. Each client has a Plan of Care prepared by a qualified Case Manager, chosen by the client, and submitted to the Aging Division for approval.

Referrals for the Assisted Living Facility Waiver are made to the Local Public Health Department. The Public Health Nurse does the functional assessment (LT101), which is also used to determine Medical Necessity for nursing facility or the Long Term Care Waiver. If a client has thirteen or more points, she/he is given a choice of nursing facility admission or assisted living facility services. The client is then referred to the Department of Family Services for determination of financial eligibility. The same guidelines are used as for Nursing facility and the Long Term Care Waiver. Waiver services cannot be provided to clients while they are inpatients of a hospital or nursing facility. A client cannot be on two waivers at the same time.

The services available are:

Case Management – The Case Manager is responsible for development, implementation and monitoring of the Plan of Care for each individual client. A reassessment of the medical necessity (LT101) and a renewal Plan of Care are required every twelve months to do at least one face-to-face visit a month to monitor the provision the Case Managers require of waiver services and to maintain a waiver record on each client.

ALF Level I, II, and III – The assisted living facility provides the personal care the client requires, 24-hour supervision and medication assistance, if necessary, at a per diem rate based on the LT101 score.

- Level I – 13-14 points
- Level II – 15-16 points
- Level III – 17 points and above

The Aging Division approves all Plans of Care.

Due to HIPAA Compliance standards, EqualityCare has eliminated the local codes and replaced them with the regular CPT-4 codes.

NOTE: THE CODES AND MODIFIERS ARE SUBJECT CHANGE

Local Code	CPT Code	Modifier(s)	Description
W6096	T2031		HCBS – Level I
W6097	T2031	TF	HCBS – Level II
W6098	T2031	TG	HCBS – Level III
W6099	T2024		HCBS – ALF – Case Management

Modifier	Description
TF	Intermediate Level of Care
TG	Complex/High Level of Care

Section 3 - Children’s Developmentally Disabled (DD) Home and Community Based Waiver Services (HCBS)

If services are not on the Plan of Care and preauthorized by DD, they will not be reimbursed.

Due to HIPAA Compliance standards, EqualityCare has eliminated the local codes and replaced them with the regular CPT-4 codes.

NOTE: THE CODES AND MODIFIERS FOR THE DD WAIVIERS ARE SUBJECT TO CHANGE

Local Code	CPT Code	Modifier(s)	Description
W8001	T2023	HA	Targeted Case Management, per month
W2100	T2022		Case Management per visit
W2101	T2024		Service Assessment/Plan of Care Development, per visit
W2102	T2024	TS	Service Assessment/Plan of Care Development, Subsequent Assess, per visit
W2103	S5130		Homemaker Service, NOS; per 15 Min
W2105	T1005		Respite Care Service, per 15 Min
W2107	T2016		Habilitation, Residential, per day
W2111	T2033		Residential Care, NOS, per day
W2114	T2013		Habilitation, Educational, per hour
W2115	S5165	NU	Home Modifications, per service (New)
W2117	S5165		Home Modifications, per service (Existing)
W2119	T1002		RN Services, per 15 Min
W2120	T1000		Complex Nursing Services per 15 minutes
W2121	T2029	NU	Specialized Medical Equipment NOS, per service (New)
W2123	T2029		Specialized Medical Equipment NOS, per service (Repair)
W2125	G0238		Therapeutic procedures to improve respiratory function, one-on-one, face-to-face, per 15 Min
W2127	H0004		Behavior Health Counseling and Therapy, per 15 Min
W2129	S9470		Nutritional Counseling, Dietitian, per visit
W2132	T1019		Personal Care Services, per 15 Min

Modifier	Description
HA	Child/Adolescent Program
NU	New Equipment
TS	Follow – Up Services

The DD Waiver for children provides home and community-based services to qualified EqualityCare eligible children from birth through twenty years of age as follows:

T2022 - Case Management - The assisting of waiver clients in gaining access to waiver and other State Plan services including medical, social and educational programs. Case managers will be responsible for ongoing monitoring of the provision of services included in the client's plan of care. Additionally, case managers will initiate and oversee the process of assessment and reassessment of client level of care and the review of plans of care every year. Case managers will be required to be credentialed as a Qualified Mental Retardation Professional (QMRP).

T2024 - Service Assessment/Plan of Care Development - The initial process of assessment of the client level of care and development of the initial plan of care.

T2024TS - Service Assessment/Plan of Care Development Subsequent Assessment - The subsequent reassessment of the client level of care and development of subsequent plans of care to be completed every year after the initial assessment.

S5130 – Homemaker Service - Services consisting of general household activities (meal preparation and routine household care) provided by a trained homemaker, when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for himself/herself or others in the home.

T1005 - Respite Care Service- Services given to individuals unable to care for themselves and provided on a short-term basis because of the absence or need for relief of those persons normally providing care. Respite services will not be provided in Residential Habilitation.

T2016 – Habilitation, Residential - Assistance with acquisition of improvement in skills related to activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable individuals from eighteen through twenty years of age to reside in a non-institutional community-integrated setting, such as group homes.

T2033 - Residential Care - Individualized services providing an array of training, assistance and support designed to allow individuals, from birth through twenty years of age, to acquire, retain and improve self-help, socialization and adaptive skills necessary to reside in the home of an adult other than the natural or adoptive parent. The Special Family Habilitation Home provider provides transportation between the residence and other locations where habilitation occurs.

T2013 - Habilitation Educational - Services provided to individuals from birth through twenty years of age, to include training and/or assistance to address functional deficits in self-help, daily living skills, mobility, learning communications, survival skills, reduction of maladaptive behaviors, community access and other necessary skills either in the home of the child's natural or adoptive parents, or in a Special Family Habilitation Home.

S5165NU - Home Modifications (New) - Those initial physical modifications to the home, required by the client's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and, without which, the client would require institutionalization.

S5165 – Home Modifications (Existing) - Those physical modifications to the home, required by the client's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and, without which, the client would require institutionalization.

T1002 – RN Services - Services listed in the client's plan of care which are within the scope of the State's Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State. The provision of this service will prevent the institutionalization of the client.

T1000 – Complex Nursing Services – delivered by an RN with CDDN certificate.

T2029NU - Specialized Equipment and Supplies (New) - Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable clients to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live. This also includes items necessary to the proper functioning of such equipment, and durable and non-durable medical equipment not available under the Medicaid State Plan.

T2029 - Specialized Equipment and Supplies (Repair) - Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable clients to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live. This also includes items necessary to the proper functioning of such equipment, and durable and non-durable medical equipment not available under the Medicaid State Plan.

G0238 - Respiratory Therapy - Respiratory therapy services will be provided under the prescription of a physician in accordance with the client's established plan of care and through direct contact between the therapist and client, as well as between therapist and individuals involved with the client. Without this service, certain individuals would be institutionalized.

H0004 – Behavior Health Counseling and Therapy - Services to include individual and group therapy, consultation with providers and caregivers directly involved with the individual; development and monitoring of behavior programs, participation in the individual planning process and counseling for primary caregivers.

S9470 – Nutritional Counseling Dietician Services - Services provided by a Registered Dietitian including meal planning, consultation with and training for caregivers, and educating the individual served. The service does not include the cost of meals.

T1019 - Personal Care Services - Assistance with eating, bathing, dressing, personal hygiene, and activities of daily living.

Limitations

DD Children's Waiver does NOT cover the following services:

- Persons who are inpatients of a hospital, NF or ICF/MR
- Prevocational, Vocational Rehabilitation, or Supported Employment if services are available under Section 110 of the Rehabilitation Act of 1973
- Room and Board

However, the following services may be covered under EqualityCare 's Health Check Program:

- Diagnostic evaluations/assessments
- Physical therapy
- Occupational therapy
- Speech/Language therapy

The following services may be covered through the Department of Education:

- Special education
- Related Services
- Transportation (Educational)
- Occupational therapy (Educational)
- Physical therapy (Educational)
- Speech/Language therapy (Educational)
- School Health Nurse

Section 4 - Adult’s Developmentally Disabled (DD) Home and Community Based Waiver Services (HCBS)

If services are not on the Plan of Care and preauthorized by DDD, they will not be reimbursed.

NOTE: THE CODES AND MODIFIERS FOR THE DD WAIVIERS ARE SUBJECT TO CHANGE

Local Code	CPT Code	Modifier(s)	Description
W8000	T2023	HB	Targeted Case Management, per month
W3001	T2022		Case Management, per visit
W3003	T2024		Service Assessment/Plan of Care Development, per visit
W3005	T2024	TS	Service Assessment/Plan of Care Development, Subsequent Assess, per visit
W3011	T2016		Habilitation/Residential per Day
W3015	T2020		Day Habilitation, per day
W3017	T2014		Habilitation Prevocational, per day
W3019	T2018		Habilitation Supported Employment, per day
W3021	T2025		Waiver Services NOS, per hour
W3023	T1019		Personal Care Services, per 15 Min
W3027	T2029	NU	Specialized Medical Equipment NOS, (New) per service
W3028	T2029		Specialized Medical Equipment NOS, (Existing) per service
W3029	S5165	NU	Home Modifications (New), per service
W3030	S5165		Home Modifications (Repair), per service
W3051	G0152		Services of Occupational Therapist in Home Health Setting, per 15 Min
W3053	G0153		Services of Speech and Language Pathologist in Home Health Setting, per 15 Min
W3055	S9470		Nutritional Counseling, Dietitian, per visit
W3057	H0004		Behavior Health Counseling and Therapy, per 15 Min
W3059	T1002		RN Services, per 15 Min
W3060	T1000		Complex Nursing Services, Per 15 minutes
W3061	G0238		Therapeutic Procedures to improve Respiratory function, Includes Monitoring, per 15 Min
W3063	G0151		Services of Physical Therapist in Home Health Setting, per 15 Min
W3071	T1005		Respite Care Services, per 15 Min

Modifier	Description
HB	Adult Program, Non Geriatric
TS	Follow-Up Service
NU	New Equipment

The DD Waiver Program for adults provides home and community-based services to qualified eligible adults with mental retardation or developmental disabilities age 21 and over as follows:

T2022 Case Management - The assisting of waiver clients in gaining access to waiver and other State Plan services including medical, social and educational programs. Case managers will be responsible for ongoing monitoring of the provision of services included in the client's plan of care. Additionally, case managers will initiate and oversee the process of assessment and reassessment of client level of care and the review of plans of care every year. Case managers will be required to be credentialed as a Qualified Mental Retardation Professional (QMRP).

T2024 – Service Assessment/Plan of Care Development - The initial process of assessment of the client level of care and development of the initial plan of care.

T2024TS - Service Assessment/Plan of Care Development Subsequent - The subsequent reassessment of the client level of care and development of subsequent plans of care to be completed every year after the initial assessment.

T2016 - Habilitation - Residential - Assistance with acquisition of improvement in skills related to activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable the individual to reside in a non-institutional setting.

T2020 - Day Habilitation - Assistance with acquisition, retention or improvement in self-help, socialization and adaptive skills which takes place in a non-residential setting separate from the home or facility in which the client resides. Day habilitation services will focus on enabling the individual to attain his or her maximum functional level, and will be coordinated with any physical, occupational, or speech therapies listed in the plan of care. In addition, day habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other settings.

T2014 -Habilitation Prevocational - Services aimed at preparing an individual for paid or unpaid employment, but which are not job task oriented. Includes teaching such concepts as compliance, attending, task completion, problem solving and safety. Pre-vocational services are provided to persons not expected to be able to join the general work force or participate in a transitional sheltered workshop within one year. All prevocational services will be reflected in the client's plan of care as directed to rehabilitative, rather than explicit employment objectives.

T2018 - Habilitation Supported Employment - Services which consist of paid employment for persons for whom competitive employment at or above minimum wage is unlikely and who, because of their disabilities, need intensive ongoing support to perform in a work setting. Supported employment is conducted in a variety of settings particularly work sites in which persons without disabilities are employed. Supported employment includes activities needed to sustain paid work by waiver clients, including supervision and training.

T2025 – Waiver Services - Services to individuals who reside with their families within the family home. In-home support services include conducting training of the waiver client to carry out a designed program which allows the individual to acquire, retain, and improve the

self-help socialization and adaptive skills necessary to reside successfully in the community.

T1019 - Personal Care Services - Personal care services include assistance with eating, bathing, dressing, personal hygiene and activities of daily living. These services may also include assistance with the preparation of meals, but do not include the cost of the meals themselves. When specified in the client's plan of care, this service may also include such housekeeping chores as bed making, dusting and vacuuming which are essential to the health and welfare of the client.

T2029NU – Specialized Medical Equipment (New) - Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable clients to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live. These services will only be covered when they are necessary to prevent institutional placement, to de-institutionalize an individual, or to allow the individual to participate in specialized services for persons with developmental disabilities.

T2029 – Specialized Medical Equipment (Repair) - Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable clients to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live. These services will only be covered when they are necessary to prevent institutional placement, to de-institutionalize an individual, or to allow the individual to participate in specialized services for persons with developmental disabilities.

S5165NU - Home Modifications (New) - Those physical adaptations to the home, required by the client's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable, the individual to function with the greater independence in the home and, without which, the client would require institutionalization. These services will not include improvements to the home which are not of direct medical or remedial benefit to the waiver client, such as carpeting, roof repair, central air- conditioning, etc. All services will be provided in accordance with applicable State or local building codes.

S5165 - Home Modifications (Repair) - Those physical adaptations to the home, required by the client's plan of care, which are necessary to ensure the health, welfare, and safety of the individual, or which enable the individual to function with the greater independence in the home and, without which, the client would require institutionalization. These services will not include improvements to the home, which are not of direct medical or remedial benefit to the waiver client, such as carpeting, roof repair, central air-conditioning, etc. All services will be provided in accordance with applicable state or local building codes.

G0152 – Services of Occupational Therapist - Occupational therapy services are services provided to people on the waiver which are identified in the person's individual plan of care (IPC) and will be provided in accordance with the client's established plan of care and through direct contact between the therapist and client. Consultation services between the therapist and individuals involved with the client cannot be counted as part of direct treatment for waiver billing purposes.

G0153 – Services of Speech and Language Pathologist - Speech therapy services will be provided to people on the waiver which are identified in the person's individual plan of care (IPC) and will be provided in accordance with the client's established plan of care and through direct contact between the therapist and client. Consultation services between the therapist and individuals involved with the client cannot be counted as part of direct treatment for waiver billing purposes.

S9470 – Nutritional Counseling, Dietician - Services provided by a Registered Dietitian including meal planning, consultation with and training for caregivers, and educating the

individual served. The service does not include the cost of meals.

H0004 – Behavior Health Counseling and Therapy - Services to include individual and group therapy, consultation with providers and caregivers directly involved with the individual, development and monitoring of behavior programs, participation in the individual planning process, and counseling for primary caregivers

T1002 – RN Services - Those services provided to clients who have been ordered by an attending physician to receive specific skilled nursing treatments and care including preventative and rehabilitative procedures. Skilled nursing services are those services prescribed and designated in the client's Individual Plan of Care (IPC). These services are provided by individual Registered Nurses who are graduates of an accredited school of nursing and are currently licensed to practice in the State of Wyoming, or by skilled nursing agencies that are Medicare certified. Skilled nursing services are provided to clients who live in their family's homes, specialized foster homes, group homes or other community settings.

T1000 – Complex Nursing Services – delivered by an RN with CDDN certificate.

G0238 – Therapeutic Procedures to Improve Respiratory Function - Those services provided to clients who have been ordered by an attending physician to receive specific respiratory therapy treatments and care including preventative and rehabilitative procedures. Respiratory therapy services are those services prescribed and designated in the client's Individual Plan of Care (IPC). Individual respiratory therapists who are graduates of appropriate university or college curriculum and are currently nationally certified or registered by the National Board of Respiratory Care provide these services.

G0151 – Services of Physical Therapist - Those services provided to clients who have been ordered by an attending physician to receive specific physical therapy treatments and care including maintenance and restorative procedures. Physical therapy services are those services prescribed and designated in the client's Individual Plan of Care (IPC). These services are provided by individual physical therapists that are graduates of appropriate university or college curricula and are currently licensed by the Wyoming Board of Physical Therapy or other states to practice in the State of Wyoming. Physical therapy services are part of the State of Wyoming's EqualityCare State Plan; however, the chronic level of physical therapy services is not covered under program policy.

T1005 - Respite Care Services - Services given to individuals unable to care for themselves; provided on a short-term basis because of the absence or need for relief of those persons normally providing care. Respite care will be provided in the client's place of residence or in a facility approved by the state, which is not a private residence. Respite care can be provided in nursing facilities, intermediate care facilities for the mentally retarded, and group homes.

Limitations

The following services are not covered under DD Adult Waiver:

- Persons who are inpatients of a hospital, SNF, NF or ICF/MR (except for respite care)
- Prevocational, Vocational Rehabilitation, or Supported Employment, if services are available under section 110 of the Rehabilitation Act of 1973
- Special education and related services
- Room and Board

Section 5 - Acquired Brain Injury (ABI) Home and Community Based Waiver Services (HCBS)

The purpose of the Acquired Brain Injury Home and Community-Based Services (HCBS) waiver is to provide services to eligible individuals who require the level of care provided in an Intermediate Care Facility for the Mentally Retarded, the cost of which would be reimbursed under the approved Medicaid State Plan. This waiver is limited to a target group of individuals ranging in age from twenty-one (21) through sixty-four (64) with acquired brain injury and specified functioning levels. Waiver services will not be furnished to clients while they are inpatients of a hospital, nursing facility, or an intermediate care facility for the mentally retarded. An individualized written plan of care will be developed for each client under this waiver. This plan of care will describe the habilitative, therapeutic, supportive and other services to be furnished, their frequency, and the type of provider who will furnish each service. For more information, contact the ABI waiver manager, Division of Developmental Disabilities at (800)-378-8581.

Due to HIPAA Compliance standards, EqualityCare has eliminated the local codes and replaced them with the regular CPT-4 codes. **Diagnosis code to be used: 294.**

NOTE: THE CODES AND MODIFIERS FOR THE DD WAIVIERS ARE SUBJECT TO CHANGE

Local Code	CPT Code	Modifier(s)	Description
W3100	T2013		Habilitation, Educational
W3101	T2022		Case Management
W3103	T2024		Services Assessment/Plan of Care Development
W3105	T2024	TS	Services Assessment/Plan of Care Development Subsequent
W3111	T2016		Habilitation, Residential
W3115	T2020		Day Habilitation
W3117	T2014		Habilitation – Prevocational
W3119	T2018		Habilitation – Supported Employment
W3123	T1019		Personal Care Services
W3127	T2029	NU	Specialized Medical Equipment (New)
W3128	T2029		Specialized Medical Equipment (Subsequent)
W3129	S5165	NU	Home Modifications (New)
W3130	S5165		Home Modifications (Subsequent)
W3151	G0152		Services of Occupational Therapist
W3153	G0153		Services of Speech and Language Pathologist
W3155	S9470		Nutritional Counseling, Dietitian
W3157	H0004		Behavior Health Counseling
W3159	T1002		RN Services
W3160	Deleted		Complex Nursing
W3161	G0238		Services of Respiratory Therapist

Waiver Services**Acquired Brain Injury (ABI) Services**

W3168	G0151		Physical Therapy Services
W3171	T1005		Respite Care Services

Modifier	Description		
TS	Follow-up Service		
NU	New Equipment		

If services are not on the Plan of Care and preauthorized by DD, they will not be reimbursed.

The Acquired Brain Injury (ABI) Home and Community-Based Services Waiver Program provides the following home and community-based services to qualified Medicaid eligible adults age twenty-one (21) through sixty-four (64):

T2013 – Habilitation, Educational - Training provided to the person served or to family members that will assist them in the compensation or the restoring of cognitive function.

T2022 - Case Management- Assisting waiver clients in gaining access to waiver and other State Plan services including medical, social and educational programs. Case Managers will be responsible for ongoing monitoring of the provision of services included in the client’s individualized plan of care. Additionally, case managers will initiate and oversee the process of assessment and reassessment of client level of care and the review of plans of care every year. Case Managers will be required to be credentialed as a Qualified ABI Professional (QABIP).

T2024 – Services Assessment/Plan of Care Development - The initial process of assessment of the client level of care and development of the initial plan of care.

T2024TS - Services Assessment/Plan of Care Development, Subsequent - The subsequent reassessment of the client level of care and development of subsequent plans of care to be completed after the initial assessment. **Habilitation:** Services designed to assist individuals in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings.

T2016 – Habilitation, Residential - Assistance with acquisition, retention, or improvement of skills related to activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable the individual to reside in a non-institutional setting.

T2020 - Day Habilitation- Assistance with acquisition, retention or improvement in self-help, socialization or adaptive skills which takes place in a non-residential setting separate from the home or facility in which the individual resides. Day habilitation services will focus on enabling the individual to attain or maintain his or her maximum functional level, and will be coordinated with any physical, occupational, or speech therapies listed in the plan of care. In addition, day habilitation services may serve to reinforce skills or lessons taught in therapy or other settings.

T2014 - Habilitation-Prevocational - Services are aimed at preparing an individual for paid or unpaid employment, but are not job-tasked oriented. Services include teaching such concepts as compliance, attendance, task completion, problem solving and safety. All prevocational services will be reflected in the client’s plan of care as directed to habilitative, rather than explicit employment objectives.

T2018 - Habilitation- Supported Employment - Services which consist of paid employment for persons for whom competitive employment at or above minimum wage is unlikely and who, because of their disabilities, need intensive ongoing support to perform in a work setting.

Supported employment is conducted in a variety of settings, particularly work sites in which persons without disabilities are employed. Supported employment includes activities needed to sustain paid work by waiver clients, including supervision and training.

T2019 - Personal Care Services- Services include assistance with eating, bathing, dressing, personal hygiene and activities of daily living. These services may include assistance with the preparation of meals, but does not include the cost of the meals themselves. When specified in the plan of care, this service may also include such housekeeping chores as bedmaking, dusting and vacuuming which are incidental to the care furnished or which are essential to the health and welfare of the individual rather than the individual's family.

T2029NU - Specialized Medical Equipment (New)- Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable clients to increase their abilities to perform activities of daily living, or to perceive, control or communicate with the environment in which they live. This service also includes items necessary for life support, ancillary supplies and equipment necessary to the proper functioning of such items, and durable and non-durable medical equipment not available under the Medicaid State Plan.

T2029 - Specialized Medical Equipment (Subsequent)- Specialized medical equipment and supplies to include devices, controls or appliances, specified in the plan of care which enable individuals to increase their abilities to perform activities of daily living, or to perceive, control or communicate with the environment in which they live. This service also includes items necessary for life support, ancillary supplies and equipment necessary to the proper functioning of such items, and durable and non-durable medical equipment not available under the Medicaid State Plan.

S5165NU - Home Modifications (New)- Those physical adaptations to the home, required by the client's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and, without which, the client would require institutionalization. These services will not include improvements to the home which are not of direct medical or remedial benefit to the waiver client, such as carpeting, roof repair, central air-conditioning, etc. All services will be provided in accordance with applicable State or local building codes.

S5165 - Home Modifications (Subsequent)- Those physical adaptations to the home, required by the client's plan of care, which are necessary to ensure the health, welfare, and safety of the individual, or which enable the individual to function with the greater independence in the home and, without which, the client would require institutionalization. These services will not include improvements to the home which are not of direct medical or remedial benefit to the waiver client, such as carpeting, roof repair, central air-conditioning, etc. All services will be provided in accordance with applicable State or local building codes.

G0152 – Services of Occupational Therapist- Occupational therapy services are services provided which are in the client's established plan of care. This can include training to become more independent in activities of daily living, increasing sensory skills, gross and fine motor function, evaluating the environment for adaptive equipment needs and teaching how to use adaptive equipment to assist in working toward independence and self reliance.

G0153 – Services of Speech and Language Pathologist- Services identified in the client's plan of care which may include speech pathology, screening and evaluation of clients with respect to speech and hearing function and the provision of ongoing therapy. Audiology services may include screenings and evaluations of the client's speech and hearing function, comprehensive audiological assessments, tests of pure tone air and bone conduction, speech audiometry and other procedures, as necessary, and the assessment of use of visual cues;

assessment of the use of amplification; and the provision of ongoing therapy.

S9470 – Nutritional Counseling, Dietician - Services provided by a Registered Dietitian including meal planning, consultation with and training for caregivers, and educating the individual served. The service does not include the cost of meals.

H0004 – Behavior Health Counseling - Services provided by a licensed psychologist, which are within the scope of the practices of the profession. Psychological therapy services include individual and group therapy; consultation with providers and individual caregivers directly involved with the individual; development and monitoring of behavior programs; participants in the individual planning process; and counseling for primary care givers (i.e. family problems dealing with the individual with the disability).

T1002 - RN Services- Those services provided to clients which have been ordered by an attending physician to receive specific skilled nursing treatments and care including preventative and rehabilitative procedures. Skilled nursing services are provided to clients who live in their families' homes, specialized foster homes, group homes or other community settings.

G0238 – Services of Respiratory Therapist - Services will be provided under the prescription of a physician in accordance with the client's established plan of care and through direct contact between therapists and clients as well as between therapists and individuals involved with the client.

G0151 - Services of Physical Therapist - Those services provided to clients who have been ordered by an attending physician to receive specific physical therapy treatments and care including maintenance and restorative procedures. Physical therapy services are those services prescribed and designated in the client's Individual Plan of Care (IPC). These services are provided by individual physical therapists that are graduates of appropriate university or college curricula and are currently licensed by the Wyoming Board of Physical Therapy or other states to practice in the State of Wyoming. Physical therapy services are part of the State of Wyoming's EqualityCare State Plan, however, the chronic level of physical therapy services is not covered under program policy.

T1005 - Respite Care Services- Services given to individuals unable to care for themselves; provided on a short-term basis because of the absence or need for relief of those persons normally providing care.

Limitations

The following services are not covered under the Acquired Brain Injury (ABI) Home and Community-Based Services Waiver:

- Persons who are inpatients of a hospital, SNF, NF, or ICF/MR
- Prevocational, Vocational Rehabilitation, or Supported Employment, if services are available under section 110 of the Rehabilitation Act of 1973
- Special education and related services
- Room and Board