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Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing (Tenn. Code Ann. § 4-5-205).

Pursuant to Tenn. Code Ann. § 4-5-229, any new fee or fee increase promulgated by state agency rule shall take effect on July 1, following the expiration of the ninety (90) day period as provided in § 4-5-207. This section shall not apply to rules that implement new fees or fee increases that are promulgated as emergency rules pursuant to § 4-5-208(a) and to subsequent rules that make permanent such emergency rules, as amended during the rulemaking process. In addition, this section shall not apply to state agencies that did not, during the preceding two (2) fiscal years, collect fees in an amount sufficient to pay the cost of operating the board, commission or entity in accordance with § 4-29-121(b).

Agency/Board/Commission: Tennessee Department of Intellectual and Developmental Disabilities**Division:****Contact Person:** Richard R. Prybilla**Address:** 315 Deaderick Street, UBS Tower, 8th Floor, Nashville, TN**Zip:** 37243**Phone:** 615-532-6526**Email:** Richard.R.Prybilla@tn.gov**Revision Type (check all that apply):**☒ Amendment☒ New☐ Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please make sure that ALL new rule and repealed rule numbers are listed in the chart below. Please enter only **ONE** Rule Number/Rule Title per row)

Chapter Number	Chapter Title
0465-01-02	Methodology Utilized to Determine Payments to Service Providers (Rate Structure)
Rule Number	Rule Title
0465-01-02-.01	Purpose
0465-01-02-.02	Scope
0465-01-02-.03	Definitions
0465-01-02-.04	Rate Setting Methodologies for Medical, Residential Services
0465-01-02-.05	Rate Setting Methodologies for Intensive Behavioral Residential Services
0465-01-02-.06	Rate Setting Methodologies for Residential and Supported Services
0465-01-02-.07	Rate Setting Methodologies for Semi-Independent Living Services
0465-01-02-.08	Special Needs Adjustments
0465-01-02-.09	Rate Setting Methodologies for Day Services
0465-01-02-.10	Rate Setting Methodologies for Day Services – In Home Care
0465-01-02-.11	Rate Setting Methodologies for Clinical Services
0465-01-02-.12	Rate Setting Methodologies for Respite and Personal Assistance Services
0465-01-02-.13	Rate Setting Methodologies for Dental Services
0465-01-02-.14	Rate Setting Methodologies for Personal Emergency Response Systems
0465-01-02-.15	Rate Setting Methodologies for Specialized Medical Equipment and Supplies
0465-01-02-.16	Rate Setting Methodologies for Environmental Modifications
0465-01-02-.17	Rate Setting Methodologies for Vision Services

0465-01-02-.18	Rate Setting Methodologies for Independent Support Coordination
0465-01-02-.19	Rate Setting Methodologies for Services Funded Exclusively by the State [Non-Waiver, State Funded (NWSF) Services]

Place substance of rules and other info here. Please be sure to include a detailed explanation of the changes being made to the listed rule(s). Statutory authority must be given for each rule change. For information on formatting rules go to <https://sos.tn.gov/products/division-publications/rulemaking-guidelines>.

Amendments

The existing Chapter 0465-01-02 Methodology Utilized to Determine Payments to Service Providers (Rate Structure) is amended by deleting it in its entirety, including the Table of Contents, but not the Chapter Title, and replacing it with the following:

New Table of Contents

0465-01-02-.01 Purpose
0465-01-02-.02 Scope
0465-01-02-.03 Definitions
0465-01-02-.04 Rate Setting Methodologies for Medical, Residential Services
0465-01-02-.05 Rate Setting Methodologies for Residential and Supported Living Services
0465-01-02-.06 Rate Setting Methodologies for Semi-Independent Living Services
0465-01-02-.07 Special Needs Adjustments
0465-01-02-.08 Value-Based Rate Setting Methodologies for Supported Employment - Individual Exploration
0465-01-02-.09 Value-Based Rate Setting Methodologies for Supported Employment - Individual Discovery
0465-01-02-.10 Value-Based Rate Setting Methodologies for Supported Employment - Individual Job Development
0465-01-02-.11 Value-Based Rate Setting Methodologies for Supported Employment - Individual Job Coaching
0465-01-02-.12 Value-Based Rate Setting Methodologies for Supported Employment -Small Group
0465-01-02-.13 Rate Setting Methodologies for Community Participation Services
0465-01-02-.14 Rate Setting Methodologies for Intermittent Employment and Community Participation
Wraparound
0465-01-02-.15 Rate Setting Methodologies for Facility-Based Day Services
0465-01-02-.16 Rate Setting Methodologies for Residential Special Needs Adjustment-Homebound and Non-Residential Homebound Support Services
0465-01-02-.17 Rate Setting Methodologies for Clinical Services
0465-01-02-.18 Rate Setting Methodologies for Respite and Personal Assistance Services
0465-01-02-.19 Rate Setting Methodologies for Dental Services
0465-01-02-.20 Rate Setting Methodologies for Personal Emergency Response Systems
0465-01-02-.21 Rate Setting Methodologies for Specialized Medical Equipment and Supplies
0465-01-02-.22 Rate Setting Methodologies for Environmental Modifications
0465-01-02-.23 Rate Setting Methodologies for Independent Support Coordination Services
0465-01-02-.24 Rate Setting Methodologies for Services Funded Exclusively by the State [Non-Waiver, State Funded (NWSF) Services]

0465-01-02-.01 PURPOSE.

- (1) This chapter establishes a rate setting methodology for Residential Day and other Services that are provided through the Department of Intellectual and Developmental Disabilities.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.02 SCOPE.

- (1) All of the rate methodologies used to determine payments to service providers set forth in these rules are subject to the availability of appropriations established in the TennCare budget for home and community based services provided under the State's approved HCBS waivers for individuals with intellectual disabilities and may be adjusted by the Department or by TennCare as necessary to assure that expenditures for these services are within and do not exceed the budgeted amount for waiver services that year; and also the provisions of Title 33 and 34 of the Tennessee Code Annotated; and, Executive Orders of the State of Tennessee Nos. 23, dated October 19, 1999, and Executive Order No. 28, dated June 19, 2013, which established the Tennessee Employment First Initiative which directs state agencies to "coordinate to increase opportunities for integrated and competitive employment for individuals with intellectual and developmental disabilities."

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.03 DEFINITIONS.

- (1) As used in these rules:
- (a) "Administrative Costs" are the allowable percentage of the service rate that includes, for example, the costs for administrative salaries and benefits, home office costs, office supplies and printing, phone and other communication, travel and conference, advertising, professional services, licensure and dues, legal and accounting fees, interest, depreciation, occupancy, general liability insurance, equipment and administrative vehicles.
 - (b) "Costs" are estimated calculations of the average expense incurred by a provider in 2004 based on information available at that time and are not intended to fully account for every expense that may have been incurred by any particular provider at or since that time in delivering a waiver service. Costs include adjustments based on funding approved by the General Assembly to increase certain components of these calculations, including primarily, wages for direct support staff. Costs may be adjusted as determined by DIDD and TennCare, subject to the availability of funding in each year's Appropriation Bill.
 - (c) "Direct Service Costs" are the costs for direct service such as staff salaries and benefits, overtime, direct supervision wages and benefits, contracted direct service/temporary help, training, recruiting/advertising, drug testing, background checks, Hepatitis B and TB tests, and other costs for direct service staff bonuses and employee appreciation events.
 - (d) "Direct Support Professional (DSP) Reimbursement Rate" means the estimated calculation of the cost of wages paid to DSPs employed by providers to deliver services requiring hands-on assistance and supervision including adjustments based on funding approved by the General Assembly to increase DSP wages.
 - (e) "Fading" is an essential component of the provision of job coaching services. Fading uses a combination of strategies such as job and task analysis, on-the-job training, including systematic instruction, use of assistive technology or other adaptive aids, and engagement of natural supports (assistance from co-workers or others) to allow the waiver participant to independently perform as much of his/her employment or self-employment roles and responsibilities as possible, without the engagement of paid support. Fading is possible when a waiver participant achieves greater independence and/or inter-dependence performing his/her job, thereby reducing the need for the job coach.
 - (f) "Full Time Equivalent (FTE)" means the total cost for one direct support staff for forty hours. It includes direct service costs, non-direct program costs, administrative costs, and twenty (20) annual days of payment to cover waiver participant absences.

- (g) "Job Coach" is a person employed by a provider agency who meets the additional qualifications specified by DIDD or TennCare and has the skills and competencies needed to identify and provide services and supports that assist a waiver participant in maintaining individualized integrated employment that pays at least minimum wage, but ideally not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities, or in maintaining self-employment, and that supports the development of the waiver participant's independence in performing employment or self-employment job functions using a fading plan.
- (h) "Job Developer" is a person employed by a provider agency who meets the additional qualifications specified by DIDD or TennCare and has the skills and competencies needed to support a waiver participant in obtaining an individualized competitive or customized job in an integrated employment setting in the general workforce, for which the waiver participant is compensated at or above the minimum wage, but ideally not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities or achievement of individualized self-employment consistent with the waiver participant's personal and career goals.
- (i) "Non-Direct Program Costs" is the allowable percentage of the service rate that includes the costs for multi-site supervisors and benefits, training, off site computer/file storage, depreciation/amortization, internal monitoring, agency case management, personal funds management, healthcare oversight, specific assistance to waiver participants-room and board, specific assistance to waiver participants-non-room and board, transportation of waiver participants, staff travel, facility maintenance, facility supplies, habilitation supplies.
- (j) "Productivity Assumptions" is a calculation which takes into account the amount of a paid job coach or job developer's time that will not be spent providing direct services, including administrative tasks (e.g. documentation, staff meetings), training, holidays, vacation, sick leave, and other emergencies, as well as the absentee rate of waiver participants receiving services which impact the billable hours of support in a typical day.
- (k) "Rate" is the amount paid per person to approved service providers for each unit of a DIDD service that is provided. A rate unit may be a portion of an hour, a day, a month, an item or a job, depending on the type of service.
- (l) "Rate Levels" are the series of rates for residential, day and other services that are based on a waiver participant's needs and the size or site of the service setting.
- (m) "Rate Level Factor" is the multiplier applied to the FTE daily cost that reflects intensity of support need and number of persons receiving services. Rate level factors were based on licensure requirements for staffing and professional judgment of estimated hours of direct support staff assistance required for waiver participants at each rate level.
- (n) "Rate Setting Methodology" is the manner in which the rates for residential, day and other services are calculated or determined.
- (o) "Special Needs Adjustment" is an additional payment that may, within the discretion of the Department and subject to resource availability, be added to the residential rate for a waiver participant in appropriate circumstances (e.g. periodic crisis that require additional support).
- (p) "Usual and customary" is the amount paid for a service in a geographic area based on what providers in the area usually charge for the same or similar service.
- (q) "Value-based adjustment" is an adjustment made to a rate of reimbursement or to one or more components used to calculate a rate of reimbursement that is intended to incentivize (and reward) certain qualitative aspects of the delivery of services or service outcomes (e.g. fading in the provision of job coaching or smaller group size in the provision of

supported employment-small group).

- (2) Waiver services (for which rate setting methodologies are set forth in these rules) shall be defined as set for the in the Section 1915(c) waiver application approved by the federal Centers for Medicare and Medicaid Services.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.04 RATE SETTING METHODOLOGIES FOR MEDICAL, RESIDENTIAL SERVICES.

(1) Medical Residential Services.

(a) For residential services that are shift-staffed, staff coverage is calculated as follows:

1. 168 hours per week - 7 days at 24 hours per day.
2. The unit of service for these residential services is a day.

(b) The calculation of the daily cost per person for a Full Time Equivalent (FTE) is:

1. Allowable Hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.
2. Annual allowable salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.
3. Divide the cost per person per year by 52 weeks and by 168 hours to arrive at the hourly cost for supervision.
4. Add together the hourly cost for direct support staff and the hourly cost for supervision.
5. Multiply the result from Step four by one and the % allowed for non-direct program costs.
6. Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.
7. Multiply the hourly cost for an FTE by 168 hours to arrive at the weekly cost for coverage.
8. Divide the weekly cost by 7 days to arrive at the daily cost for coverage.
9. Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.

(c) Calculation for the daily rate per person is:

1. For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate level factor.
2. Divide the result of Step one by the facility size.
3. Multiply the result of Step two by 385 (to allow for 20 absent days).
4. Divide the result of Step three by 365 to arrive at the daily rate.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.05 RATE SETTING METHODOLOGIES FOR RESIDENTIAL AND SUPPORTED LIVING SERVICES.

(1) Residential Habilitation and Supported Living (Shift-Staffed) Model.

(a) For residential services that are shift-staffed, staff coverage is calculated as follows:

1. 138 hours per week - 5 days at 18 hours per day and 2 days at 24 hours per day is equal to one week.
2. The unit of service for these residential services is a day.

(b) The calculation of the daily cost per person for a Full Time Equivalent (FTE) is:

1. Hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.
2. Annual salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.
3. Divide the cost per person per year by 52 weeks and by 138 hours to arrive at the hourly cost for supervision.
4. Add together the hourly cost for direct support staff and the hourly cost for supervision.
5. Multiply the result from Step four by one and the % allowed for non-direct program costs.
6. Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.
7. Multiply the hourly cost for an FTE by 138 hours to arrive at the weekly cost for coverage.
8. Divide the weekly cost by 7 days to arrive at the daily cost for coverage.
9. Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.

(c) Calculation for the daily rate per person is:

1. For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate level factor.
2. Divide the result of Step one by the facility size.
3. Multiply the result of Step two by 385 (to allow for 20 absent days).
4. Divide the result of Step three by 365 to arrive at the daily rate.

(2) Supported Living-Companion Model.

(a) For non-shift staffed, companion model the unit of service is a day. The calculations are

as follows:

- (b) Calculate the daily rate per person.
 - 1. Multiply the annual stipend by one and the % for benefits.
 - 2. Add the companion room and board allowance.
 - 3. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.
 - 4. Add costs in steps one through three.
 - 5. Multiply the result of step four by one and the % for non-direct program costs.
 - 6. Multiply the result of step five by one and the % for administrative costs.
 - 7. Divide the result of step six by 365.
 - 8. Multiply the result of step seven by 385 (to allow for 20 absent days).
 - 9. Divide the result of step eight by 365 to arrive at the daily rate.

(3) Family Model for Residential Services.

- (a) Family Model Residential Services are those provided in a family home under the supervision of a residential services agency. The unit of service is a day.

- (b) Calculate the daily rate per person.
 - 1. Multiply the annual stipend by one and the % for benefits.
 - 2. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.
 - 3. Add direct supervision at annual salary plus % for benefits divided by 10 waiver participants divided by 365 days.
 - 4. Add costs in steps 1 through 3 above.
 - 5. Multiply the result of step four by one and the percent for non-direct program costs.
 - 6. Multiply the result of step five by one and the percent for administrative costs.
 - 7. Divide the result of step six by 365 days.
 - 8. Multiply the result of step seven by 385 days (to allow for 20 absent days).
 - 9. Divide the result of step eight by 365 days to arrive at the daily rate.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.06 RATE SETTING METHODOLOGIES FOR SEMI-INDEPENDENT LIVING SERVICES.

- (1) Calculation for Semi-Independent Living Services is:
- (a) The unit of service for these residential services is a day.
 - (b) The rate is calculated on a monthly basis. For purposes of billing, the monthly rate is converted to a per diem amount. The per diem rate will be billed for each day of the month that the person is enrolled in the services, regardless of whether any direct assistance was provided that day.
 - (c) The rate is calculated using the following factors:
 - 1. Average monthly hours, inclusive of on-call services;
 - 2. Personal Assistant services quarter hour reimbursement rate as defined in 0465-01-02-.18;
 - 3. Transportation cost.
 - (d) Semi-Independent Living Incentive: is a one-time payment of \$2,500 per waiver participant per provider. The waiver participant must have transitioned directly into Semi-Independent Living from a twenty-four hour residential service following at least thirty consecutive paid residential days. The waiver participant must then participate in Semi-Independent Living for six (6) consecutive months immediately following the transition to be eligible for the incentive payment.
 - (e) Semi-Independent Living Transition Rate: is double that of the semi-independent living daily rate and limited to waiver participants who require additional hours of support during the period immediately following transition. This rate is only available for up to thirty days following the initial transition from a twenty-four hour residential service to Semi-Independent Living and requires thirty consecutive paid residential days immediately prior and adjacent to the claim for the transition rate.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.07 SPECIAL NEEDS ADJUSTMENTS.

- (1) An adjustment up to an additional thirty-five dollars (\$35.00) per day is available to Residential Habilitation and Supported Living Levels 1-4 for homes with 1-4 persons.
- (2) An adjustment of twenty dollars (\$20.00) per day is available to Residential Habilitation homes with 5 or more people except for reasons of a vacancy in the home.
- (3) This adjustment may be used for additional staff coverage or higher wages for staff.
- (4) A special needs adjustment does not change the rate level designated for the waiver participant, but adjusts the rate level as a result of one or more of the following circumstances:
 - (a) The waiver participant has a history of significant behavioral or psychiatric problems such as DSM-V diagnosis, violent acting out, serious self-injury or danger to others that are now not apparent due to the design or intensity of services being received or the person has a situation that is unique and results in the need for additional resources.
 - (b) Less intensive services will likely result in recurrence of previous problems. The Regional Office must review the special adjustment at least annually.

- (c) The waiver participant is in circumstances that are time limited but that require support(s) at a higher level than described by the Level. (For example, the person has had a serious illness, injury, or surgery that requires more support while he/she is recovering than the Level describes.) A special adjustment may be approved for up to ninety (90) days and may be extended for an additional ninety (90) days.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.08 VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT-INDIVIDUAL EXPLORATION.

- (1) Supported employment-individual exploration is paid for on an outcome basis.
- (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver application and includes all of the service required to deliver the expected outcome.
- (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job coach hour of service (as described in 0465-01-02-.11(3)(a)), including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Employee-related expenses;
 - 3. Administrative costs;
 - 4. Productivity assumptions; and
 - 5. Travel costs;
 - (b) A value-based incentive of \$4.30/hour above actual cost (rate model) to reward provision of services expected to result in the person identifying a goal of competitive integrated employment;
 - (c) Average number of job coach hours required to complete service; and
 - (d) Billable service adjustment for percentage of waiver participants that do not complete the service due to reasons beyond the purview of the provider's control.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.09 VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT-INDIVIDUAL DISCOVERY.

- (1) Supported employment-individual discovery is paid for on an outcome basis.
- (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver

application and includes all of the service required to deliver the expected outcome.

- (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job developer hour of service, including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Adjustment of \$2.75/hour to increase DSP reimbursement rate to account for additional qualifications required for discovery;
 - 3. Employee-related expenses;
 - 4. Administrative costs;
 - 5. Productivity assumptions; and
 - 6. Travel costs;
 - (b) Average number of job developer hours required to complete service; and
 - (c) Billable service adjustment for percentage of waiver participants that do not complete the service due to reasons beyond the purview of the provider's control.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.10 VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT-INDIVIDUAL JOB DEVELOPMENT.

- (1) Supported employment-individual job development is paid for on an outcome basis.
- (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver application and includes all of the service required to deliver the expected outcome.
- (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job developer hour of service, including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Adjustment of \$2.75/hour to increase DSP reimbursement rate to account for additional qualifications required for job developer;
 - 3. Employee-related expenses;
 - 4. Administrative costs;
 - 5. Productivity assumptions; and
 - 6. Travel costs;
 - (b) Rate level factor based on average number of job developer hours required to complete service and secure outcome adjusted for intensity of support needs of the individual; and
 - (c) Billable service adjustment for percentage of waiver participants that do not complete the

service due to reasons beyond the purview of the provider's control.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208 et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.11 VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT-INDIVIDUAL JOB COACHING.

- (1) Supported employment-individual job coaching is reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) Average cost of job coach hour of service divided by four (4), including these component costs:
 1. DSP reimbursement rate;
 2. Employee-related expenses;
 3. Administrative costs;
 4. Productivity assumptions, including projected average waiver participant absentee rate of 12 percent; and
 5. Travel cost; and
 - (b) A value-based incentive of \$3/hour above actual cost (rate model) to reward the provision of services to support waiver participant success in competitive, integrated employment - so long as fading expectations are met (see below);
 - (c) Value-based adjustments beginning six months after initiation of individual job coaching to incentivize fading of services, based on a combination of: the intensity of support needs of the waiver participant, the length of time the waiver participant has held the current job or self-employment position, and the effectiveness of job coaching services as demonstrated by fading achieved.
- (4) Additionally, where an waiver participant has a need for job coaching that is equal to or less than one hour per week, a monthly "Stabilization and Monitoring" payment will be used to encourage ongoing, effective monitoring of the waiver participant's employment situations, with minimum monthly contact requirements that will allow for prevention of otherwise avoidable job losses or reductions in work hours.
- (5) Quality Payment for Hours Worked Milestone under Supported Employment-Individual Employment Support: Payment earned and paid for additional/atypical effort of provider that results in a waiver participant working in competitive integrated employment achieving above average hours worked in a six-month period. There are two quality payment levels available:
 - (a) The base tier payment is \$1,500 and is made based on the waiver participant working in competitive integrated employment between three-hundred ninety (390) and five-hundred nineteen (519) hours in the prior six (6) calendar month period. This is average hourly employment that is at least 15 but less than 20 hours/week.
 - (b) The top tier payment is \$2,000 and is made based on the waiver participant working five-

hundred and twenty (520) or more hours in the prior six (6) calendar month period. This is average hourly employment that is 20 hours/week or more.

- (c) A provider may earn the quality payment up to twice a year.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02.-12 VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT-SMALL GROUP.

- (1) Supported employment-small group is reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) Average cost of job coach hour of service divided by four (4), including these component costs:
 1. DSP reimbursement rate;
 2. Employee-related expenses;
 3. Administrative costs;
 4. Productivity assumptions, including projected average waiver participant absentee rate of 8.23 percent; and
 5. Travel costs;
 - (b) Participant transportation cost per unit per person;
 - (c) Administrative adjustment based on the number of waiver participants in the small group and the expected job coach-to-waiver participant staffing ratio (one job coach for a group of two, three, or four waiver participants); and
 - (d) Value-based adjustment to incentivize smaller group size.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02.-13 RATE SETTING METHODOLOGY FOR COMMUNITY PARTICIPATION SERVICES.

- (1) Community participation services are reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate.

- (b) Non-direct program costs;
- (c) Administrative costs;
- (d) Transportation costs per unit per person;
- (e) Projected average waiver participant absentee rate of 8.23 percent; and
- (f) Rate Level Factor as defined in 0465-01-02-.03.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.14 RATE SETTING METHODOLOGY FOR INTERMITTENT EMPLOYMENT AND COMMUNITY PARTICIPATION WRAPAROUND.

- (1) Intermittent employment and community participation wraparound services are reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs;
 - (c) Administrative costs;
 - (d) Projected average waiver participant absentee rate of 8.23 percent; and
 - (e) Rate Level Factor as defined in 0465-01-02-.03.
 - (f) This service is provided in a waiver participant's home and has no transportation cost included.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.15 RATE SETTING METHODOLOGY FOR FACILITY-BASED DAY SERVICES.

- (1) Facility-based day services are reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs;

- (c) Administrative costs;
- (d) Transportation costs per unit per person;
- (e) Projected average waiver participant absentee rate of 8.23 percent; and
- (f) Rate Level Factor as defined in 0465-01-02-.03.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.16 RATE SETTING METHODOLOGY FOR RESIDENTIAL SPECIAL NEEDS ADJUSTMENT-HOMEBOUND AND NON-RESIDENTIAL HOMEBOUND SUPPORT SERVICES.

- (1) Residential special needs adjustment-homebound and non-residential homebound support service are reimbursed on a fee-for-service basis.
- (2) The unit of service is a day, constituting staff coverage for 6 hours each day.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs at the allowable percentage;
 - (c) Administrative costs;
 - (d) Projected average waiver participant absentee rate percentage based on 20 leave days per year; and
 - (e) Rate level factor as defined in 0465-01-02-.03.
 - (f) This setting is provided in a waiver participant's home and has no transportation cost included.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.17 RATE SETTING METHODOLOGIES FOR CLINICAL SERVICES.

- (1) The unit for all types of therapy services and nursing services is a quarter hour.
- (2) The unit for behavioral services is one quarter (1/4) of an hour.
- (3) The rate for clinical services is based on comparison with national rates of payment and comparable rates of payment within the State for like services.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated

Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.18 RATE SETTING METHODOLOGIES FOR RESPITE AND PERSONAL ASSISTANCE SERVICES.

- (1) The unit for respite services may be one quarter (1/4) of an hour or daily rates as determined by DIDD based on the duration of services provided. The unit for personal assistance services is a quarter hour.
- (2) The determination of rates in this section (.18) is calculated based on units of one quarter (1/4) of an hour for one (1) staff person or of one day of allowable direct service costs for one (1) staff person and a percentage of administrative costs. Reimbursement for two (2) staff to deliver services to one (1) waiver participant at the same time is not covered under any circumstances.
- (3) There will be one (1) maximum rate for one-quarter (1/4) of an hour of Personal Assistance.
- (4) There will be one (1) maximum rate for one-quarter (1/4) of an hour of Respite services.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.19 RATE SETTING METHODOLOGIES FOR DENTAL SERVICES.

- (1) Dental Services rates are those set by TennCare for reimbursement of Medicaid funded dental care.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.20 RATE SETTING METHODOLOGIES FOR PERSONAL EMERGENCY RESPONSE SYSTEMS.

- (1) Rates paid are the usual and customary rates for installation and monitoring set by the company providing the service.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.21 RATE SETTING METHODOLOGIES FOR SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES.

- (1) Rates paid are the usual and customary costs for the equipment or supplies.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d);

Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.22 RATE SETTING METHODOLOGIES FOR ENVIRONMENTAL MODIFICATIONS.

- (1) Rates paid are the usual and customary costs for the modification.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.23 RATE SETTING METHODOLOGIES FOR INDEPENDENT SUPPORT COORDINATION SERVICES.

- (1) Current rates were derived after consideration of provider input, resource availability as well as system service requirements. Future changes in amounts paid for this service will be made utilizing such tools as: consultation with stake-holders (e.g. Independent Support Coordinators, Independent Support Coordination Agencies/Organizations), review of similar services in other states, market conditions, and system needs.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.24 RATE SETTING METHODOLOGIES FOR SERVICES FUNDED EXCLUSIVELY BY THE STATE [NON-WAIVER; STATE FUNDED (NWSF) SERVICES].

- (1) Rates paid are discretionary and based upon waiver participant need, limited by system and service requirements and subject to DIDD funding and resource availability.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et. seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD) on 09/30/2019 and is in compliance with the provisions of T.C.A. § 4-5-222.

I further certify the following:

Notice of Rulemaking Hearing filed with the Department of State on: 06/06/19

Rulemaking Hearing(s) Conducted on: 07/29/19

Date: 9/30/2019

Signature: 

Name of Officer: Brad Turner

Title of Officer: DIDD Commissioner



Subscribed and sworn to before me on: 9/30/19


Notary Public Signature: 

My commission expires on: 7/9/22

Agency/Board/Commission: Dept. of Intellectual and Developmental Disabilities

Rule Chapter Number(s): 0465-01-02

All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.


Herbert H. Slatery III
Attorney General and Reporter
10/2/2019 Date

Department of State Use Only

Filed with the Department of State on: 10/7/19

Effective on: 11/5/20

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PUBLICATIONS


Tre Hargett
Secretary of State

Public Hearing Comments

One copy of a document that satisfies T.C.A. § 4-5-222 must accompany the filing.

See attached comments and related responses.

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process, all agencies shall conduct a review of whether a proposed rule or rule affects small business.

The proposed rules will not impact small businesses.

Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 "any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments." (See Public Chapter Number 1070 (<http://publications.tnsosfiles.com/acts/106/pub/pc1070.pdf>) of the 2010 Session of the General Assembly)

The proposed rules will have no impact to local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A)** A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

The rules establish a rate setting methodology for residential, day and other services that are provided through the Department of Intellectual and Developmental Disabilities. This amendment to the existing rules will:

- Remove two services, intensive behavioral residential services and visions services, which are no longer provided in the home and community-based waivers
- Remove the rate setting methodologies for day services and replace with rate setting methodologies for distinct day and employment services
- Change day services reimbursement from daily rates to quarter hour rates
- Replace in-home day service with three new services: intermittent employment and community participation wraparound, residential special needs adjustment - homebound and non-residential homebound support service
- Establish rate setting methodologies for three new pre-employment services: exploration, discovery and job development
- Establish quantity incentive payments for providers of supported employment when waiver participants are engaged in certain levels of competitive integrated employment

- (B)** A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

33-1-309

- (C)** Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

Providers of the Department of Intellectual and Developmental Disabilities home and community based services will be most directly affected by this rule. These rules authorize payment for services to contracted direct service providers of 1915(c) home and community based services, these providers participated in the rule making hearing but did not provide feedback as to whether the urged adoption or rejection of the rules.

- (D)** Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule or the necessity to promulgate the rule;

None

- (E)** An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

State expenditures for employment and day services as a whole are not expected to change from the promulgation of these rules. The final rate structure was developed with the expectation that current funding for employment and day services would be maintained. Assumptions regarding the utilization of services were made in determining the overall impact of the changes to day and employment waiver expenditures.

- (F)** Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Melinda Lanza, Budget Director for the Tennessee Department of Intellectual and Developmental Disabilities

- (G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Melinda Lanza, Budget Director for the Tennessee Department of Intellectual and Developmental Disabilities

- (H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

315 Deaderick Street, UBS Building, 8th Floor, Nashville, TN 37243, 615-253-3166, Melinda.Lanza@tn.gov

- (I) Any additional information relevant to the rule proposed for continuation that the committee requests.

**Comments/Responses from July 29, 2019, Rulemaking Hearing
for Revised Rate Methodology Rules**

	Comment Submitted By	Rule	Comment	Response
1.)	Robin Atwood, TNCO	All employment services	Employment rates are not adequate to cover the required services. The issue with the rate methodology is the use of DSP wages in the formula. DSPs are not qualified to provide this service. The service must be provided by someone with the required credentials.	For all individual employment services, the DSP wage of \$10/hr is adjusted, as follows: for Exploration, a value-based incentive of \$4.30/hour above actual cost (rate model) to reward the provision of services expected to result in the person identifying a goal of competitive integrated employment; for Discovery and Job Development, an adjustment of \$2.75/hour to increase DSP reimbursement rate to \$12.75/hour to account for additional qualifications required for this service; and for Job Coaching, a value-based incentive of \$3/hour above actual cost (rate model) to reward the provision of services to support individual success in competitive, integrated employment—so long as fading expectations are met.
2.)	Beverly Matthews, Pacesetters, Inc.	0465-01-02-.03(1)(d)	The rule states that Full-Time Equivalent is the total cost for one direct support staff for 40 hours. What is the rate of pay that that is figured on? Is that at \$10 an hour or less? Is there an average? Because there's a lot of agencies that pay different rates and that could mean something different to each agency.	The DSP reimbursement rate reflected in the reimbursement methodology is based on available appropriations for home and community based services. For Fiscal Year 2019-2020, the DSP hourly wage is funded at \$10. As described in the response above, adjustments/incentives are included in the reimbursement methodology for all individual employment services.

**Comments/Responses from July 29, 2019, Rulemaking Hearing
for Revised Rate Methodology Rules**

	Comment Submitted By	Rule	Comment	Response
3.)	Bill Toye, Pacesetters, Inc.	0465-01-02.05	How are we supposed to ask questions when this is made so confusing? For one thing, they list percentages with no figures. So anybody in math, if you have no figures how do you figure out what percentage to use? They also say divided by four residents. In supported living we're supposedly only to have three residents; why are they listing this as a four resident figure? And then on No. 5 under this Methodology it says, Multiply the results of Step 4 by 1. Why would they even put that in there? Multiplying anything by 1 is the same figure.	The rate methodology for residential and supported living services has not changed. This is the same methodology that has been in place for several years. Actual numbers are not used so that adjustments can be easily made when the Administration and/or legislature adds additional appropriations to increase waiver rates. If specific numbers are included in the rate methodology rules, then the department would have to go through the rule making process every time additional funds are appropriated to increase rates. This could delay the time in which the rate increase could be implemented. The division by 4 pertains to supervision and not direct care staff. Number 5 under this methodology says multiply the results of Step by four by one AND the % allowed for non-direct program cost. For example, if the percentage for non direct program cost is 20%, then you would divide the result of Step four by 1.20.

**Comments/Responses from July 29, 2019, Rulemaking Hearing
for Revised Rate Methodology Rules**

	Comment Submitted By	Rule	Comment	Response
3.) cont.			It seems without actual figures to start with, when you say hourly support staff wages, or something, how do you know where to go with this? It's just from somebody that's familiar with mathematics, trying to even guess what this comes out to without any kind of percentage or figures that they might use, and again one of the benefits is divided by four residents, which we usually don't have four residents in any home. To this point that's not something that we have rates for, anyway. And then why do they even bother putting No. 5 in here because dividing anything by 1 is the same figure.	
4.)	George Cunningham, Journeys In Community Living	0465-01-02-.04	This section talks about the rate being based on direct support staff, but I don't see any mention of LPN or RN supervision, which are required in that home and are a significant cost. So, I would suggest that be added in here, if it's not already. I don't see it mentioned.	The rate methodology for Medical Residential services has not changed. The calculation of the FTE includes the cost of LPN coverage and RN supervision.

**RULE OF THE TENNESSEE
DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES**

**CHAPTER 0465-01-02
METHODOLOGY UTILIZED TO DETERMINE PAYMENTS
TO SERVICE PROVIDERS (RATE STRUCTURE)**

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0465-01-02-.01 PURPOSE.

- (1) This chapter establishes a rate setting methodology for Residential Day and other Services that are provided through the Department of Intellectual and Developmental Disabilities.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), & 303~~ 33-1-303 (3) and (11), 33-1-

304, 33-1-305 (1), and 33-1-309 (d); ~~33-1-204~~; Executive Orders of the State of Tennessee Nos. ~~9, 10, 21 & 34~~ 23 dated ~~February 7, 1996, October 14, 1996, July 29, 1999, and~~ October 19, 1999 ~~respectively~~; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. § 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.02 SCOPE.

- (1) All of the rate methodologies used to determine payments to service providers set forth in these rules are subject to the availability of appropriations established in the TennCare budget for home and community based services provided under the State's approved HCBS waivers for individuals with intellectual disabilities and may be adjusted by the Department or by TennCare as necessary to assure that expenditures for these services are within and do not exceed the budgeted amount for waiver services that year; and also the provisions of Title 33 and 34 of the Tennessee Code Annotated; and, Executive Orders of the State of Tennessee Nos. ~~9, 10, 21 and~~ 23, dated ~~February 7, 1996, October 14, 1996, July 29, 1999 and~~ October 19, 1999, ~~respectively~~ and Executive Order No. 28, dated June 19, 2013, which established the Tennessee Employment First Initiative which directs state agencies to "coordinate to increase opportunities for integrated and competitive employment for individuals with intellectual and developmental disabilities."

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204~~; Executive Orders of the State of Tennessee Nos. ~~9, 10, 21 & 34~~ 23, dated ~~February 7, 1996, October 14, 1996, July 29, 1999, and~~ October 19, 1999 ~~respectively~~; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.03 DEFINITIONS.

- (1) As used in these rules:
 - (a) "Administrative Costs" are the allowable percentage of the service rate that includes, for example, the costs for administrative salaries and benefits, home office costs, office supplies and printing, phone and other communication, travel and conference, advertising, professional services, licensure and dues, legal and accounting fees, interest, depreciation, occupancy, general liability insurance, equipment and administrative vehicles.
 - (b) "Costs" are estimated calculations of the average expense incurred by a provider in 2004 based on information available at that time and are not intended to fully account for every expense that may have been incurred by any particular provider at or since that time in delivering a waiver service. ~~Costs include adjustments based on funding approved by the General Assembly to increase certain components of these calculations, including primarily, wages for direct support staff. Costs will be reviewed on a periodic basis based on information provided in Uniform Cost Reports and~~ may be adjusted as determined by DIDD and TennCare, subject to the availability of funding in each year's Appropriation Bill.
 - (c) "Direct Service Costs" are the costs for direct service such as staff salaries and benefits, overtime, direct supervision wages and benefits, contracted direct service/temporary help, training, recruiting/advertising, drug testing, background checks, Hepatitis B and TB tests, and other costs for direct service staff bonuses

and employee appreciation events.

- (d) "Direct Support Professional (DSP) Reimbursement Rate" shall be the estimated calculation of the cost of wages paid to DSPs employed by providers to deliver services requiring hands-on assistance and supervision, including adjustments based on funding approved by the General Assembly to increase DSP wages.
- (e) "Fading" is an essential component of the provision of job coaching services. Fading uses a combination of strategies such as job and task analysis, on-the-job training, including systematic instruction, use of assistive technology or other adaptive aids, and engagement of natural supports (assistance from co-workers or others) to allow the waiver participant to independently perform as much of his/her employment or self-employment roles and responsibilities as possible, without the engagement of paid support. Fading is possible when a waiver participant achieves greater independence and/or inter-dependence performing his/her job, thereby reducing the need for the job coach.
- ~~(d)~~ (f) "Full Time Equivalent (FTE)" means the total cost for one direct support staff for forty hours. It includes direct service costs, non-direct program costs, administrative costs, and twenty (20) annual days of payment to cover ~~service recipient~~ waiver participant absences.
- (g) "Job Coach" is a person employed by a provider agency who meets the additional qualifications specified by DIDD or TennCare and has the skills and competencies needed to identify and provide services and supports that assist a waiver participant in maintaining individualized integrated employment that pays at least minimum wage, but ideally not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities, or in maintaining self-employment, and that supports the development of the waiver participant's independence in performing employment or self-employment job functions using a fading plan.
- (h) "Job Developer" is a person employed by a provider agency who meets the additional qualifications specified by DIDD or TennCare and has the skills and competencies needed to support a waiver participant in obtaining an individualized competitive or customized job in an integrated employment setting in the general workforce, for which the waiver participant is compensated at or above the minimum wage, but ideally not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities or achievement of individualized self-employment consistent with the waiver participant's personal and career goals.
- ~~(e)~~ (i) "Non-Direct Program Costs" is the allowable percentage of the service rate that includes the costs for multi-site supervisors and benefits, training, off site computer/file storage, depreciation/amortization, internal monitoring, agency case management, personal funds management, healthcare oversight, specific assistance to ~~individuals~~ waiver participants-room and board, specific assistance to ~~individuals~~ waiver participant-non-room and board, transportation of individuals, staff travel, facility maintenance, facility supplies, habilitation supplies.
- (j) "Productivity Assumptions" is a calculation which takes into account the amount of a paid job coach or job developer's time that will not be spent providing direct services, including administrative tasks (e.g. documentation, staff meetings), training, holidays, vacation, sick leave, and other emergencies, as well as the absentee rate of waiver participants receiving services which impact the billable hours of support in a typical day.

- (f) (k) "Rate" is the amount paid per person to approved service providers for each unit of a DIDD service that is provided. A rate unit may be a portion of an hour, a day, a month, an item or a job, depending on the type of service.
- (g) (l) "Rate Levels" are the series of rates for residential, day and other services that are based on a ~~service recipient's~~ **waiver participant's** needs and the size or site of the service setting.
- (h) (m) "Rate Level Factor" is the multiplier applied to the FTE daily cost that reflects intensity of support need and number of persons ~~in the home~~ **receiving services**. Rate level factors were based on licensure requirements for staffing and professional judgment of estimated hours of direct support staff assistance required for **individuals waiver participants** at each rate level.
- (i) (n) "Rate Setting Methodology" is the manner in which the rates for residential, day and other services are calculated or determined.
- (j) (o) "Special Needs Adjustment" is an additional payment that may, within the discretion of the ~~Division~~ **Department** and subject to resource availability, be added to the residential rate for ~~an individual~~ **a waiver participant** in appropriate circumstances, (e.g. periodic crisis that require additional support).
- ~~(k) "Uniform Cost Report" is a report relating to costs and/or operating expenses/revenues completed by providers that is submitted as required by the Division Department of Intellectual Disabilities Services. The Uniform Cost Report is completed and transmitted in the manner, format and timeframe required by the Division Department.~~
- (p) "Usual and customary" is the amount paid for a service in a geographic area based on what providers in the area usually charge for the same or similar service.
- (q) "Value-based adjustment" is an adjustment made to a rate of reimbursement or to one or more components used to calculate a rate of reimbursement that is intended to incentivize (and reward) certain qualitative aspects of the delivery of services or service outcomes (e.g. fading in the provision of job coaching or smaller group size in the provision of supported employment-small group).
- (2) Waiver services (for which rate setting methodologies are set forth in these rules) shall be defined as set for the in the Section 1915(c) waiver application approved by the federal Centers for Medicare and Medicaid Services.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201 et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-309 (d); 33-1-204; 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 and 303; 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare.~~
Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.04 RATE SETTING METHODOLOGIES FOR MEDICAL, RESIDENTIAL SERVICES.

- (1) Medical Residential Services.
 - (a) For residential services that are shift-staffed, staff coverage is calculated as follows:

1. 168 hours per week - 7 days at 24 hours per day.
 2. The unit of service for these residential services is a day.
- (b) The calculation of the daily cost per person for a Full Time Equivalent (FTE) is:
1. Allowable Hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.
 2. Annual allowable salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.
 3. Divide the cost per person per year by 52 weeks and by 168 hours to arrive at the hourly cost for supervision.
 4. Add together the hourly cost for direct support staff and the hourly cost for supervision.
 5. Multiply the result from Step four by one and the % allowed for non-direct program costs.
 6. Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.
 7. Multiply the hourly cost for an FTE by 168 hours to arrive at the weekly cost for coverage.
 8. Divide the weekly cost by 7 days to arrive at the daily cost for coverage.
 9. Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.
- (c) Calculation for the daily rate per person is:
1. For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate level factor.
 2. Divide the result of Step one by the facility size.
 3. Multiply the result of Step two by 385 (to allow for 20 absent days).
 4. Divide the result of Step three by 365 to arrive at the daily rate.

Authority: ~~Tenn. Code Ann.~~ (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); ~~33-1-204~~; Executive Orders of the State of Tennessee Nos. ~~9, 10, 21 & 34~~ 23, dated ~~February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999~~ respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.05 RATE SETTING METHODOLOGIES FOR **INTENSIVE BEHAVIORAL RESIDENTIAL AND SUPPORTED LIVING SERVICES.**

- ~~(1) — Includes Behavioral Analyst Services.~~
- ~~(2) — For residential services that are shift-staffed, staff coverage is calculated as follows:~~
 - ~~(a) — 168 hours per week—7 days at 24 hours per day.~~
 - ~~(b) — The unit of service for these residential services is a day.~~
- ~~(3) — The calculation of the daily cost per person for a Full-Time Equivalent (FTE) is:~~
 - ~~(a) — Allowable hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.~~
 - ~~(b) — Annual allowable salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.~~
 - ~~(c) — Divide the cost per person per year by 52 weeks and by 168 hours to arrive at the hourly cost for supervision.~~
 - ~~(d) — Add together the hourly cost for direct support staff and the hourly cost for supervision.~~
 - ~~(e) — Multiply the result from Step four by one and the % allowed for non-direct program costs.~~
 - ~~(f) — Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.~~
 - ~~(g) — Multiply the hourly cost for an FTE by 168 hours to arrive at the weekly cost for coverage.~~
 - ~~(h) — Divide the weekly cost by 7 days to arrive at the daily cost for coverage.~~
 - ~~(i) — Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.~~
- ~~(4) — Calculation for the daily rate per person is:~~
 - ~~(a) — For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate-level factor.~~
 - ~~(b) — Divide the result of Step (a) by the facility size.~~
 - ~~(c) — Multiply the result of Step (b) by 385 (to allow for 20 absent days).~~
 - ~~(d) — Divide the result of Step (c) by 365 to arrive at the program costs.~~
 - ~~(e) — Add an allowance for BA services to the program component to the step above (d) to determine the daily rate.~~
- (1) Residential Habilitation and Supported Living (Shift-Staffed) Model.
 - (a) For residential services that are shift-staffed, staff coverage is calculated as follows:
 1. 138 hours per week - 5 days at 18 hours per day and 2 days at 24 hours per day is equal to one week.

2. The unit of service for these residential services is a day.
- (b) The calculation of the daily cost per person for a Full Time Equivalent (FTE) is:
1. Hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.
 2. Annual salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.
 3. Divide the cost per person per year by 52 weeks and by 138 hours to arrive at the hourly cost for supervision.
 4. Add together the hourly cost for direct support staff and the hourly cost for supervision.
 5. Multiply the result from Step four by one and the % allowed for non-direct program costs.
 6. Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.
 7. Multiply the hourly cost for an FTE by 138 hours to arrive at the weekly cost for coverage.
 8. Divide the weekly cost by 7 days to arrive at the daily cost for coverage.
 9. Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.

- (c) Calculation for the daily rate per person is:
1. For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate level factor.
 2. Divide the result of Step one by the facility size.
 3. Multiply the result of Step two by 385 (to allow for 20 absent days).
 4. Divide the result of Step three by 365 to arrive at the daily rate.

(2) Supported Living-Companion Model.

- (a) For non-shift staffed, companion model the unit of service is a day. The calculations are as follows:
- (b) Calculate the daily rate per person.
1. Multiply the annual stipend by one and the % for benefits.
 2. Add the companion room and board allowance.
 3. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.
 4. Add costs in steps one through three.

5. Multiply the result of step four by one and the % for non-direct program costs.
6. Multiply the result of step five by one and the % for administrative costs.
7. Divide the result of step six by 365.
8. Multiply the result of step seven by 385 (to allow for 20 absent days).
9. Divide the result of step eight by 365 to arrive at the daily rate.

(3) Family Model for Residential Services.

- (a) Family Model Residential Services are those provided in a family home under the supervision of a residential services agency. The unit of service is a day.
- (b) Calculate the daily rate per person.
 1. Multiply the annual stipend by one and the % for benefits.
 2. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.
 3. Add direct supervision at annual salary plus % for benefits divided by 10 waiver participants divided by 365 days.
 4. Add costs in steps 1 through 3 above.
 5. Multiply the result of step four by one and the percent for non-direct program costs.
 6. Multiply the result of step five by one and the percent for administrative costs.
 7. Divide the result of step six by 365 days.
 8. Multiply the result of step seven by 385 days (to allow for 20 absent days).
 9. Divide the result of step eight by 365 days to arrive at the daily rate.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.06 RATE SETTING METHODOLOGIES FOR ~~RESIDENTIAL AND SUPPORTED LIVING SEMI-INDEPENDENT LIVING SERVICES.~~

~~(1) — Residential Habilitation and Supported Living (Shift-Staffed) Model.~~

(a) ~~For residential services that are shift-staffed, staff coverage is calculated as follows:~~

- ~~1. 138 hours per week—5 days at 18 hours per day and 2 days at 24 hours per day is equal to one week.~~
- ~~2. The unit of service for these residential services is a day.~~

(b) ~~The calculation of the daily cost per person for a Full Time Equivalent (FTE) is:~~

- ~~1. Hourly direct support staff wages plus % for benefits for the hourly cost for direct support staff.~~
- ~~2. Annual salary for direct supervision plus % for benefits divided by four residents equals the cost per person per year.~~
- ~~3. Divide the cost per person per year by 52 weeks and by 138 hours to arrive at the hourly cost for supervision.~~
- ~~4. Add together the hourly cost for direct support staff and the hourly cost for supervision.~~
- ~~5. Multiply the result from Step four by one and the % allowed for non-direct program costs.~~
- ~~6. Multiply the result from Step five by one and the % allowed for administrative costs to arrive at the hourly cost for coverage.~~
- ~~7. Multiply the hourly cost for an FTE by 138 hours to arrive at the weekly cost for coverage.~~
- ~~8. Divide the weekly cost by 7 days to arrive at the daily cost for coverage.~~
- ~~9. Divide the daily cost by allowable FTEs to arrive at the daily FTE cost per person.~~

(c) ~~Calculation for the daily rate per person is:~~

- ~~1. For each Rate Level and Home Size, multiply the daily per person FTE cost by the rate level factor.~~
- ~~2. Divide the result of Step one by the facility size.~~
- ~~3. Multiply the result of Step two by 385 (to allow for 20 absent days).~~
- ~~4. Divide the result of Step three by 365 to arrive at the daily rate.~~

(2) ~~Supported Living Companion Model~~

(a) ~~For non-shift staffed, companion model the unit of service is a day. The calculations are as follows:~~

(b) ~~Calculate the daily rate per person.~~

- ~~1. Multiply the annual stipend by one and the % for benefits.~~
- ~~2. Add the companion room and board allowance.~~

3. ~~3. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.~~
4. ~~4. Add costs in steps one through three.~~
5. ~~5. Multiply the result of step four by one and the % for non-direct program costs.~~
6. ~~6. Multiply the result of step five by one and the % for administrative costs.~~
7. ~~7. Multiply the result of step seven by 385 (to allow for 20 absent days).~~
8. ~~8. Divide the result of step eight by 365 to arrive at the daily rate.~~

~~(3) Family Model for Residential Services~~

- ~~(a) Family Model Residential Services are those provided in a family home under the supervision of a residential services agency. The unit of service is a day.~~
- ~~(b) Calculate the daily rate per person.~~
 - ~~1. Multiply the annual stipend by one and the % for benefits.~~
 - ~~2. Add the number of hours per year at the hourly rate for relief staff divided by 365 days.~~
 - ~~3. Add direct supervision at annual salary plus % for benefits divided by 10 individuals divided by 365 days.~~
 - ~~4. Add costs in steps 1 through 3 above.~~
 - ~~5. Multiply the result of step four by one and the percent for non-direct program costs.~~
 - ~~6. Multiply the result of step five by one and the percent for administrative costs.~~
 - ~~7. Divide the result of step six by 365 days.~~
 - ~~8. Multiply the result of step seven by 385 days (to allow for 20 absent days).~~
 - ~~9. Divide the result of step eight by 365 days to arrive at the daily rate.~~

(1) Calculation for Semi-Independent Living Services is:

- (a) The unit of service for these residential services is a day.
- (b) The rate is calculated on a monthly basis. For purposes of billing, the monthly rate is converted to a per diem amount. The per diem rate will be billed for each day of the month that the person is enrolled in the services, regardless of whether any direct assistance was provided that day.
- (c) The rate is calculated using the following factors:
 1. Average monthly hours, inclusive of on-call services;

2. Personal Assistant services quarter hour reimbursement rate as defined in 0465-01-02-.18;
 3. Transportation cost.
- (d) Semi-Independent Living Incentive: is a one-time payment of \$2,500 per waiver participant per provider. The waiver participant must have transitioned directly into Semi-Independent Living from a twenty-four hour residential service following at least thirty consecutive paid residential days. The waiver participant must then participate in Semi-Independent Living for six (6) consecutive months immediately following the transition to be eligible for the incentive payment.
 - (e) Semi-Independent Living Transition Rate: is double that of the semi-independent living daily rate and limited to waiver participants who require additional hours of support during the period immediately following transition. This rate is only available for up to thirty days following the initial transition from a twenty-four hour residential service to Semi-Independent Living and requires thirty consecutive paid residential days immediately prior and adjacent to the claim for the transition rate.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare.~~
Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.07 ~~RATE SETTING METHODOLOGIES FOR SEMI-INDEPENDENT LIVING SERVICES~~
~~SPECIAL NEEDS ADJUSTMENTS.~~

- (1) ~~Calculation for Semi-Independent Living Services is:~~
 - (a) ~~The unit of service for these residential services is a month.~~
 - (b) ~~Average monthly hours of service were used to calculate the rate.~~
 - (c) ~~The average monthly hours are inclusive of on-call services.~~
 - (d) ~~The PA quarter hour reimbursement was used in determining the monthly rate.~~
- (2) ~~Take amount in Step above and add an allowance for transportation costs to determine the maximum rate.~~
 - (1) An adjustment up to an additional thirty-five dollars (\$35.00) per day is available to Residential Habilitation and Supported Living Levels 1-4, for homes with 1-4 persons.
 - (2) An adjustment of twenty dollars (\$20.00) per day is available to Residential Habilitation homes with 5 or more people except for reasons of a vacancy in the home.
 - (3) This adjustment may be used for additional staff coverage or higher wages for staff.
 - (4) A special needs adjustment does not change the rate level designated for the waiver participant, but adjusts the rate level as a result of one or more of the following circumstances:

- (a) The waiver participant has a history of significant behavioral or psychiatric problems such as DSM-V diagnosis, violent acting out, serious self-injury or danger to others that are now not apparent due to the design or intensity of services being received or the person has a situation that is unique and results in the need for additional resources.
- (b) Less intensive services will likely result in recurrence of previous problems. The Regional Office must review the special adjustment at least annually.
- (c) The waiver participant is in circumstances that are time limited but that require support(s) at a higher level than described by the Level. (For example, the person has had a serious illness, injury, or surgery that requires more support while he is recovering than the Level describes.) A special adjustment may be approved for up to ninety (90) days and may be extended for an additional ninety (90) days.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.08 ~~SPECIAL NEEDS ADJUSTMENTS~~ VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT -INDIVIDUAL EXPLORATION.

- ~~(1) — An adjustment up to an additional thirty-five dollars (\$35.00) per day is available to Residential Habilitation and Supported Living Levels 1-4, for homes with 1-4 persons.~~
- ~~(2) — An adjustment of twenty dollars (\$20.00) per day is available to Residential Habilitation homes with 5 or more people except for reasons of a vacancy in the home.~~
- ~~(3) — This adjustment may be used for additional staff coverage or higher wages for staff.~~
- ~~(4) — A special needs adjustment does not change the rate level designated for the individual, but adjusts the rate level as a result of one or more of the following circumstances:~~
 - ~~(a) — The individual has a history of significant behavioral or psychiatric problems such as DSM-IV diagnosis, violent acting out, serious self-injury or danger to others that are now not apparent due to the design or intensity of services being received or the person has a situation that is unique and results in the need for additional resources.~~
 - ~~(b) — Less intensive services will likely result in recurrence of previous problems. The Regional Office must review the special adjustment at least annually.~~
 - ~~(c) — The individual is in circumstances that are time limited but that require support(s) at a higher level than described by the Level. (For example, the person has had a serious illness, injury, or surgery that requires more support while he is recovering than the Level describes.) A special adjustment may be approved for up to ninety (90) days and may be extended for an additional ninety (90) days.~~

- (1) Supported employment-individual exploration is paid for on an outcome basis.
- (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver application and includes all of the service required to deliver the expected outcome.
- (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job coach hour of service (as described in 0465-01-02-.11(3)(a)), including these component costs:
 1. DSP reimbursement rate;
 2. Employee-related expenses;
 3. Administrative costs;
 4. Productivity assumptions; and
 5. Travel costs;
 - (b) A value-based incentive of \$4.30/hour above actual cost (rate model) to reward provision of services expected to result in the person identifying a goal of competitive integrated employment;
 - (c) Average number of job coach hours required to complete service; and
 - (d) Billable service adjustment for percentage of waiver participants that do not complete the service due to reasons beyond the purview of the provider's control.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 and 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare.~~ **Administrative History:** Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.09 ~~RATE SETTING METHODOLOGIES FOR DAY SERVICES~~ VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT -INDIVIDUAL DISCOVERY.

- ~~(1) Calculation for day services is:~~
 - ~~(a) The unit of service is a day.~~
 - ~~(b) For day services staff coverage is calculated for 6 hours per day for 243 days per year.~~
- ~~(2) The cost models are calculated with the following direct service cost factors:~~
 - ~~(a) Non-direct program costs at the allowable percentage.~~
 - ~~(b) Administrative costs at the allowable percentage.~~
 - ~~(c) Transportation costs per day per person.~~

- ~~(d) — Twenty (20) leave days.~~
- ~~(e) — Rate Level Factor based on service setting and the need of the individual.~~
- ~~(f) — Day Service settings (except in In Home Day Services) include day habilitation facilities, community locations and community employment locations.~~
- (1) Supported employment-individual discovery is paid for on an outcome basis.
- (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver application and includes all of the service required to deliver the expected outcome.
- (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job developer hour of service, including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Adjustment of \$2.75/hour to increase DSP reimbursement rate to account for additional qualifications required for discovery;
 - 3. Employee-related expenses;
 - 4. Administrative costs;
 - 5. Productivity assumptions; and
 - 6. Travel costs;
 - (b) Average number of job developer hours required to complete service; and
 - (c) Billable service adjustment for percentage of waiver participants that do not complete the service due to reasons beyond the purview of the provider's control.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare.~~
Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.10 ~~RATE SETTING METHODOLOGIES FOR DAY SERVICES — IN HOME DAY VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT -INDIVIDUAL JOB DEVELOPMENT.~~

- ~~(1) — Calculation for day services — home day per person is:~~
 - ~~(a) — The unit of service is a day.~~
 - ~~(b) — For day services staff coverage is calculated for 6 hours per day for 243 days per year.~~
- ~~(2) — The cost models are calculated with the following direct service cost factors:~~

- ~~(a) — Non-direct program costs at the allowable percentage.~~
 - ~~(b) — Administrative costs at the allowable percentage.~~
 - ~~(c) — Twenty (20) leave days.~~
 - ~~(d) — Rate level factor based on service setting and the need of the individual.~~
 - ~~(e) — This Day Service setting is limited to the home and has no transportation cost included.~~
- (1) Supported employment-individual job development is paid for on an outcome basis.
 - (2) The unit is a complete episode of the service as defined in the approved Section 1915(c) waiver application and includes all of the service required to deliver the expected outcome.
 - (3) The outcome-based rate is calculated using the following factors:
 - (a) Average cost of job developer hour of service, including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Adjustment of \$2.75/hour to increase DSP reimbursement rate to account for additional qualifications required for job developer;
 - 3. Employee-related expenses;
 - 4. Administrative costs;
 - 5. Productivity assumptions; and
 - 6. Travel costs;
 - (b) Rate level factor based on average number of job developer hours required to complete service and secure outcome adjusted for intensity of support needs of the individual; and
 - (c) Billable service adjustment for percentage of waiver participants that do not complete the service due to reasons beyond the purview of the provider's control.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Tennessee Public Chapter 1100, June 23, 2010. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.11 ~~RATE SETTING METHODOLOGIES FOR CLINICAL SERVICES~~ VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT -INDIVIDUAL JOB COACHING.

- ~~(1) — The unit for therapy and nursing services is a quarter hour.~~
- ~~(2) — The Unit for behavioral services is one quarter (1/4) of an hour.~~

- ~~(1) The unit for therapy and nursing services is a quarter hour.~~
- ~~(2) The Unit for behavioral services is one quarter (1/4) of an hour.~~
- ~~(3) The rate for clinical services is based on comparison with national rates of payment and comparable rates of payment within the State for like services.~~
- (1) Supported employment-individual job coaching is reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
- (a) Average cost of job coach hour of service divided by four (4), including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Employee-related expenses;
 - 3. Administrative costs;
 - 4. Productivity assumptions, including projected average waiver participant absentee rate of 12 percent; and
 - 5. Travel cost; and
 - (b) A value-based incentive of \$3/hour above actual cost (rate model) to reward the provision of services to support waiver participant success in competitive, integrated employment - so long as fading expectations are met (see below);
 - (c) Value-based adjustments beginning six months after initiation of individual job coaching to incentivize fading of services, based on a combination of: the intensity of support needs of the waiver participant, the length of time the waiver participant has held the current job or self-employment position, and the effectiveness of job coaching services as demonstrated by fading achieved.
- (4) Additionally, where a waiver participant has a need for job coaching that is equal to or less than one hour per week, a monthly "Stabilization and Monitoring" payment will be used to encourage ongoing, effective monitoring of the waiver participant's employment situations, with minimum monthly contact requirements that will allow for prevention of otherwise avoidable job losses or reductions in work hours.
- (5) Quality Payment for Hours Worked Milestone under Supported Employment -Individual Employment Support: Payment earned and paid for additional/atypical effort of provider that results in a waiver participant working in competitive integrated employment achieving above average hours worked in a six-month period. There are two quality payment levels available:
- (a) The base tier payment is \$1,500 and is made based on the waiver participant working in competitive integrated employment between three-hundred ninety (390) and five-hundred nineteen (519) hours in the prior six (6) calendar month period. This is average hourly employment that is at least 15 but less than 20 hours/week.

- (b) The top tier payment is \$2,000 and is made based on the waiver participant working five-hundred and twenty (520) or more hours in the prior six (6) calendar month period. This is average hourly employment that is 20 hours/week or more.
- (c) A provider may earn the quality payment up to twice a year.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02.12 ~~RATE SETTING METHODOLOGIES FOR RESPITE AND PERSONAL ASSISTANCE SERVICES~~ VALUE-BASED RATE SETTING METHODOLOGY FOR SUPPORTED EMPLOYMENT - SMALL GROUP.

- ~~(1) — The unit for respite and personal assistance services may be one quarter (1/4) of an hour or daily rates as determined by DIDD.~~
- ~~(2) — The determination of rates in this section (.09) is calculated based on units of one quarter (1/4) of an hour for one (1) staff person or of one day of allowable direct service costs for one staff person and a percentage of administrative costs. Reimbursement for two (2) staff to deliver services to one (1) service recipient at the same time is not covered under any circumstances.~~
- ~~(3) — There will be one (1) maximum rate for one quarter (1/4) of an hour of Personal Assistance.~~
- ~~(4) — There will be one (1) maximum rate for one quarter (1/4) of an hour of Respite services.~~
- (1) Supported employment-small group is reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) Average cost of job coach hour of service divided by four (4), including these component costs:
 - 1. DSP reimbursement rate;
 - 2. Employee-related expenses;
 - 3. Administrative costs;
 - 4. Productivity assumptions, including projected average waiver participant absentee rate of 8.23 percent; and
 - 5. Travel costs;
 - (b) Participant transportation cost per unit per person;

- (c) Administrative adjustment based on the number of waiver participants in the small group and the expected job coach-to-waiver participant staffing ratio (one job coach for a group of two, three, or four waiver participants); and
- (d) Value-based adjustment to incentivize smaller group size.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.13 ~~RATE SETTING METHODOLOGIES FOR DENTAL SERVICES~~ RATE SETTING METHODOLOGY FOR COMMUNITY PARTICIPATION SERVICES.

- ~~(1) — Dental Services rates are those set by TennCare for reimbursement of Medicaid-funded dental care.~~
- (1) Community participation services are reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate.
 - (b) Non-direct program costs;
 - (c) Administrative costs;
 - (d) Transportation costs per unit per person;
 - (e) Projected average waiver participant absentee rate of 8.23 percent; and
 - (f) Rate Level Factor as defined in 0465-01-02-.03.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.14 ~~RATE SETTING METHODOLOGY FOR PERSONAL EMERGENCY RESPONSE SYSTEMS~~ INTERMITTENT EMPLOYMENT AND COMMUNITY PARTICIPATION WRAPAROUND.

- ~~(1) — Rates paid are the usual and customary rates for installation and monitoring set by the company providing the service.~~
- (1) Intermittent employment and community participation wraparound services are reimbursed on a fee-for-service basis.

- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs;
 - (c) Administrative costs;
 - (d) Projected average waiver participant absentee rate of 8.23 percent; and
 - (e) Rate Level Factor as defined in 0465-01-02-.03.
 - (f) This service is provided in a waiver participant's home and has no transportation cost included.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.15 RATE SETTING METHODOLOGY FOR ~~SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES~~ FACILITY-BASED DAY SERVICES.

- ~~(1) — Rates paid are the usual and customary costs for the equipment or supplies.~~
- (1) Facility-based day services are reimbursed on a fee-for-service basis.
- (2) The unit of service is 15 minutes.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs;
 - (c) Administrative costs;
 - (d) Transportation costs per unit per person;
 - (e) Projected average waiver participant absentee rate of 8.23 percent; and
 - (f) Rate Level Factor as defined in 0465-01-02-.03.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for~~

Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.16 RATE SETTING ~~METHODOLOGIES FOR ENVIRONMENTAL MODIFICATIONS~~
METHODOLOGY FOR RESIDENTIAL SPECIAL NEEDS ADJUSTMENT-HOMEBOUND AND NON-
RESIDENTIAL HOMEBOUND SUPPORT SERVICES.

~~(1) — Rates paid are the usual and customary costs for the modification.~~

- (1) Residential special needs adjustment-homebound and non-residential homebound support service are reimbursed on a fee-for-service basis.
- (2) The unit of service is a day, constituting staff coverage for 6 hours each day.
- (3) The fee-for-service rate is calculated using the following factors:
 - (a) DSP reimbursement rate;
 - (b) Non-direct program costs at the allowable percentage;
 - (c) Administrative costs;
 - (d) Projected average waiver participant absentee rate percentage based on 20 leave days per year; and
 - (e) Rate level factor as defined in 0465-01-02-.03.
 - (f) This setting is provided in a waiver participant's home and has no transportation cost included.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.17 RATE SETTING METHODOLOGIES FOR ~~VISION SERVICES~~ CLINICAL SERVICES.

~~(1) — Rates paid are a combination of the usual and customary charges for examination and corrective lenses.~~

- (1) The unit for all types of therapy services and nursing services is a quarter hour.
- (2) The ~~U~~unit for behavioral services is one quarter (1/4) of an hour.
- (3) The rate for clinical services is based on comparison with national rates of payment and comparable rates of payment within the State for like services.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§~~

33-1-302 & 303, 4-5-208 et seq. and its applicable regulations concerning emergency rules; and, the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.18 RATE SETTING METHODOLOGIES FOR ~~INDEPENDENT SUPPORT COORDINATION~~ RESPITE AND PERSONAL ASSISTANCE SERVICES.

- ~~(1) — Current rates in this category are found at Rule 0620-06-03-.04 (h) and were derived after consideration of provider input, resource availability as well as system service requirements. Future changes in amounts paid for this service will be made utilizing such tools as: consultation with stake holders (e.g. Independent Support Coordinators, Independent Support Coordination Agencies/Organizations), review of similar services in other states, market conditions, and system needs.~~
- (1) The unit for respite services may be one quarter (1/4) of an hour or daily rates as determined by DIDD based on the duration of services provided. The unit for personal assistance services is a quarter hour.
- (2) The determination of rates in this section (.18) is calculated based on units of one quarter (1/4) of an hour for one (1) staff person or of one day of allowable direct service costs for one (1) staff person and a percentage of administrative costs. Reimbursement for two (2) staff to deliver services to one (1) waiver participant at the same time is not covered under any circumstances.
- (3) There will be one (1) maximum rate for one-quarter (1/4) of an hour of Personal Assistance.
- (4) There will be one (1) maximum rate for one-quarter (1/4) of an hour of Respite services.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.19 RATE SETTING METHODOLOGIES FOR ~~SERVICES FUNDED EXCLUSIVELY BY THE STATE [NON-WAIVER; STATE FUNDED (NWSF) SERVICES]~~ DENTAL SERVICES.

- ~~(1) — Rates paid are discretionary and based upon Service Recipient need, limited by system and service requirements and subject to DIDD funding and resource availability.~~
- (1) Dental Services rates are those set by TennCare for reimbursement of Medicaid funded dental care.

Authority: ~~Tenn. Code Ann. (T.C.A.) §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); 33-1-204; Executive Orders of the State of Tennessee Nos. 9, 10, 21 & 34 23, dated February 7, 1996, October 14, 1996, July 29, 1999, and October 19, 1999 respectively; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; T.C.A. §§ 33-1-302 & 303, 4-5-208, et seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.~~

0465-01-02-.20 RATE SETTING METHODOLOGIES FOR PERSONAL EMERGENCY RESPONSE SYSTEMS.

- (1) Rates paid are the usual and customary rates for installation and monitoring set by the company providing the service.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.21 RATE SETTING METHODOLOGIES FOR SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES.

- (1) Rates paid are the usual and customary costs for the equipment or supplies.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.22 RATE SETTING METHODOLOGIES FOR ENVIRONMENTAL MODIFICATIONS.

- (1) Rates paid are the usual and customary costs for the modification.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.23 RATE SETTING METHODOLOGIES FOR INDEPENDENT SUPPORT COORDINATION SERVICES.

- (1) Current rates were derived after consideration of provider input, resource availability as well as system service requirements. Future changes in amounts paid for this service will be made utilizing such tools as: consultation with stake-holders (e.g. Independent Support Coordinators, Independent Support Coordination Agencies/Organizations), review of similar services in other states, market conditions, and system needs.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services

under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.

0465-01-02-.24 RATE SETTING METHODOLOGIES FOR SERVICES FUNDED EXCLUSIVELY BY THE STATE [NON-WAIVER; STATE FUNDED (NWSF) SERVICES].

- (1) Rates paid are discretionary and based upon waiver participant need, limited by system and service requirements and subject to DIDD funding and resource availability.

Authority: T.C.A. §§ 4-3-2701, 4-3-2707, 4-4-103, 4-5-201, et seq., 33-1-201, 33-1-202, 33-1-203 (1) and (6), 33-1-204, 33-1-301, 33-1-302 (a)(3) and (a)(4), 33-1-303 (3) and (11), 33-1-304, 33-1-305 (1), and 33-1-309 (d); Executive Order of the State of Tennessee No. 23, dated October 19, 1999; State of Tennessee Delegated Purchase Authority DP 10-28649-00 Reg. 515; §§ 33-1-302 and 303; 4-5-208, et. seq. and its applicable regulations concerning emergency rules; and the "Reimbursement Rate" for Medical Services under DIDD federal waiver(s) for provision of services as administered by TennCare. Administrative History: Original rule filed December 12, 2013; effective March 12, 2014.