

STATE <u>Texas</u>	A
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HOFA 179 <u>11-56</u>	

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39. Case Management Services for Infants and Toddlers with Developmental Disabilities

- (a) Effective for services provided on or after October 1, 2011, two statewide prospective rates are established for case management services for infants and toddlers with developmental disabilities. A 15 minute unit of service is established. Case management must be delivered as follows:
- (1) Face to face contact. Interaction directly with the child and the child's parent or routine caregiver billed in 15 minute increments.
 - (2) Telephone contact. Interaction directly with the child's parent or routine caregiver billed in 15 minute increments.
- (b) Provider costs will be collected for use as a basis for updating reimbursement rates.
- (1) Reported expenses. Providers must ensure that all requested costs are included in the cost reporting system.
 - (2) Data collected. The data collected includes the number of units of service provided. The cost data includes direct services costs, programmatic indirect costs, and general and administrative costs including salaries, benefits, and non-labor costs. Programmatic indirect costs include salaries, benefits and other costs of this case management program that are indirectly related to the delivery of case management services to clients. General and administrative overhead costs include the salaries, benefits and other costs that, while not directly part of the case management services program, constitute costs that support the operations of the case management services program.
 - (3) Unallowable expenses. Unallowable expenses included in the cost report are omitted from the cost report database and appropriate adjustments are made to expenses and other information reported by providers. The purpose is to ensure that the database reflects costs and other information which are consistent with efficiency, economy, and quality of care; are necessary for the provision of covered case management services; and are consistent with federal and state Medicaid regulations. If there is doubt as to the accuracy or allowability of a significant part of the information reported, individual cost reports may be eliminated from the database.
 - (4) Total costs are projected from the historical reporting period to the prospective rate period. Cost projections adjust the allowable historical costs for significant changes in cost related conditions anticipated to occur between the historical cost period and the prospective rate period. Significant conditions include, but are not necessarily limited to, wage and price inflation or deflation, changes in program utilization and efficiency, and modification of federal or state regulations and statutes. The personal consumption expenditures (PCE) chain-type index, which is based on data from the U.S. Department of Commerce, is the most general measure of inflation is used to project costs.

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