

### **New Contracts:**

1. With new contracts, will the coordinators be expected to enforce the unit caps? (For example, 8 hours of collateral per family per month without approval from the DCS)

No, that is the provider's responsibility.

2. A. If service standards are in place, does that mean the providers must follow them for county funds?

YES

B. Does this include billing units?

YES

3. Do services provided to probation cases still need approval by DCS for billing court, case conferences and additional collaterals?

YES

### **General Billing issues:**

1. Can collateral contacts over the phone be billed?

Yes, bill as collateral contact

2. What happens if a staff member is doing two billable things at one time? For example, if the staff member is traveling to a family's home and makes a billable phone call to another family while on the way? Or makes a billable phone call to another family while waiting on a family that no-shows.

Providers can only bill for one service during a given time.

3. If a family is Medicaid eligible and is being served by a Medicaid provider, can the provider bill IV-B for travel and case conferences?

NO

4. Providers continue to struggle with the ¼ hour billing requirement. If the worker travels 9 minutes to the home and 9 minutes back to the office, would they add this together and bill ¼ hour or would each time be ¼ hour?

Providers should round each instance/event.

5. For custody/step parent studies...how do we handle the family payment portion?

The family is only to pay if the court orders the family to do so. The family would pay the contracted provider and this amount would be subtracted from the amount billed to IV-B.

6. How do we handle studies that started before the contract year? How would they bill the hours prior to July 1?

Bill any study initiated before July 1, 2006 on the June 2005 claim regardless of whether or not the home study is complete.

7. Can providers cancel their IVB contracts and work directly with and bill the county DCS for services provided if they do not want to follow the service standards?

NO

8. When payment is made from county funds only, do the counties offices have to assure that providers of services follow the service standards for staff and supervisory qualifications?

YES

9. When a provider needs to request a waiver for a new staff person, should they just submit the paperwork on the reconsideration form?

Yes, just change the title on the form to read "New Waiver Request."

9. The billable unit under Foster Home Study standards is unclear. Can time working on the home study (as defined in the service standards) be billed?

Yes, it was the intent of that all home studies be billed in the same manner. Time working on the home study (in addition to face to face time) can be billed.

### **Client Satisfaction Survey:**

1. In lieu of the new form, can providers use their own client satisfaction survey?

YES

2. Can a large agency that has many clients in several programs in multiple regions do a random sample of the client satisfaction survey?

YES

3. Can the client satisfaction survey response scale be changed from 1 - 5 to Agree –Disagree

YES

4. Do clients have to sign the survey?

NO

**Supervision:**

1. How much supervision is required of providers who use part-time staff who may only work a few hrs a week?

Part-time/contract staff should receive a pro rata amount of supervision not less than at least ½ hr face-to-face per month.

**Intensive Family Reunification Services/Intensive Family Preservation Services:**

1. The standards indicate that providers cannot bill the same families to Medicaid and also to IFPS/IFRS funds for Intensive Services. In the case of families where reunification is the goal, the parents might not have Medicaid but the child would. Since there is a great deal of work with the parents to prepare for the child's return, how would that be billed?

Medicaid should not be billed for IFPS/IFRS services.

2. The standards state that there must be staff available 24/7. Would those staff need to be Homebuilders trained staff?

Yes, the staff member who is available 24/7 does have to be homebuilders trained as it affects the fidelity of the program. The primary worker should be the one on 24/7. That person's supervisor is the back-up because s/he should be trained in the homebuilders model and s/he should be familiar with the case. The third option would be a person that is knowledgeable of the homebuilders program and case.

**FAKT:**

1. CB provides FAKT for Regions 9, 10 and 15. In order to do so, they have a FAKT coordinator and two administrative assistants. How do they bill for the admin. Assistant's time? Do they bill it under the coordinator @ a unit rate of \$50.00 per hour or do they factor their time into the actual cost for the other FAKT component codes?

All staff who are providing coordination (as defined in the service standards) would be billed at the hourly coordination rate. Staff should meet the qualifications as stated in the service standards.

**Court time:**

1. Providers have indicated that they are often in court for several hours. The service standards indicate that they can only bill for one hour. Can this be changed to allow it to be overridden by approval of the local office?

Local DCS offices can, with written approval, authorize additional court hours.

2. If a provider is requested by the DCS to attend court and the provider is never called to testify, can the court time be billed?

Yes

**Misc:**

1. In the case of prevention services funded through Family Support or SSBG funds, who would the quarterly reports go to?

Reports should be sent to DCS with numeric codes (no identifying information) used to identify clients.