



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

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March 20, 2009

TO: ADHC (43) Provider Letter #A-34
HCB (42) provider Letter #A-76
SCL (33) Provider Letter #A-30

RE: Michelle P Waiver Administrative Regulation 907 KAR 1:835

Dear Kentucky Medicaid Provider:

The Department for Medicaid Services is pleased to announce that the Michelle P. Waiver regulation is now operating under 907 KAR 1:835. You may link to a copy of this ordinary regulation from the Michelle P. Waiver web page at <http://chfs.ky.gov/dms/mpw.htm> under the regulations section. Important items to note in this final version of the regulation are as follows:

- Case management service information now on page 17-19 and 33 of the regulation.
- The regulation states “a case manager shall arrange for a service but not provide a service directly”. The exception referred to in subparagraph 8 of Section 7 (2) 8 on p.18-19 has not been approved by CMS at this time.
- Respite care service information now on page 21 of the regulation.
- Respite care service section no longer specifies the location of the respite.

On January 21, 2009 a policy clarification was provided to SHPS regarding start dates for PAs for services. The PA will start on the date listed on the MAP-24 which corresponds with the date on the MAP-109. The CMHC will complete all assessments and re-assessments, submitting the MAP-351 and obtaining the level of care. The case manager remains responsible for submitting the PA packet for services to the SHPS. That packet should contain the following documents: a copy of the MAP-351 completed by the CMHC, MAP-109, MAP-10, MAP-350, and MAP-24. The packet should be submitted within 60 days of the issuance of the level of care. If a person is being discharged from another waiver and is being admitted into MPW, then the discharging (HCB, SCL, MPW) agency is also required to send SHPS a discharging MAP-24.

Please note that the IQ score is a required item on the MAP-351 for this waiver, thus the item on the form needs to be completed. There is no supporting IQ documentation required.

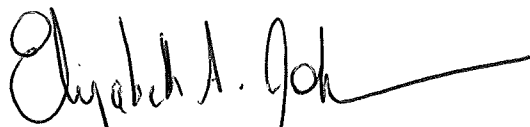
As stated in 907KAR1:835, Section 3. "Maintenance of Records."

- "(1) A Michelle P. waiver provider shall maintain:
- (a) A clinical record for each Michelle P. recipient that shall contain the following:
 - 1. Pertinent medical, nursing and social history
 - 2. A comprehensive assessment entered on form MAP-351 and signed by the:
 - a. Assessment team; and
 - b. Department;
 - 3. A completed MAP 109;
 - 4. A copy of the MAP-350 signed by the recipient or his or her legal representative at the time of application or reapplication and each recertification thereafter;
 - 5. The name of the case manager;
 - 6. Documentation of all level of care determinations;
 - 7. All documentation related to prior authorizations, including requests, approvals, and denials;
 - 8. Documentation of each contact with, or on behalf of, a Michelle P. recipient;
 - 9. Documentation that the Michelle P. recipient receiving ADHC services or legal representative was provided a copy of the ADHC center's posted hours of operation;
 - 10. Documentation that the recipient or legal representative was informed of the procedure for reporting complaints; and
 - 11. Documentation of each service provided. The documentation shall include:
 - a. The date the service was provided;
 - b. The duration of the service;
 - c. The arrival and departure time of the provider, excluding travel time, if the service was provided at the Michelle P. waiver recipient's home;
 - d. Itemization of each service delivered;
 - e. The Michelle P. recipient's arrival and departure time, excluding travel time, if the service was provided outside the recipient's home;
 - f. Progress notes which shall include documentation of changes, responses, and treatments utilized to meet the Michelle P. recipient's needs; and
 - g. The signature of the service provider; and
 - (b) Fiscal reports, service records, and incident reports regarding services provided."

Please note that the information required for a MPW recipient's record will be different than an HCB or SCL member's record because those waivers have different requirements.

We are continuing to authorize Michelle P. Waiver assessments to individuals on the SCL Future Waiting List (as it was at the time of the lawsuit settlement agreement in July) with additional rollouts scheduled for April and June, 2009. In July of 2009 individuals in the community will be able to contact their local Community Mental Health Center directly to request an assessment for the Michelle P. Waiver. The Department for Medicaid Services continues to appreciate the collaboration among agencies in HCB and SCL as you collaborate on the Michelle P. Waiver.

Sincerely,

A handwritten signature in black ink, appearing to read "Elizabeth A. Johnson", with a long horizontal flourish extending to the right.

Elizabeth A. Johnson
Commissioner

EAJ/jab/vlp00714