

Current Provider Information for Supports for Community Living (SCL) Waiver

Updated: March 5, 2019

- **Becoming an SCL Provider**
 - If you are interested in becoming an SCL provider, visit the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) [SCL provider website](#) for more information.
- **SCL Rate Increase**
 - New rates took effect for SCL on July 1, 2018. The new rates are listed below.
 - You can read more about the rate change [here](#).

Traditional Service	New Rate Per Unit
Case Management	\$352.00
Community Access (Individual)	\$8.80
Community Access (Group)	\$4.40
Community Guide	\$8.80
Consultative Clinical & Therapeutic Services	\$24.75
Day Training	\$2.42
Day Training (Licensed Adult Day Health Center)	\$3.30
Person Centered Coach	\$6.33
Personal Assistance	\$6.09
Positive Behavior Supports	\$731.50
Residential Support Level I (4-8 residents)	\$143.39
Residential Support Level I (3 residents or less)	\$189.71
Residential Support Level II (12+ hours supervision)	\$155.86
Residential Support Level II (Less than 12 hours supervision)	\$86.90
Respite	\$3.05
Supported Employment	\$11.28
Technology Assisted Residential	\$86.90

- **Level of Care (LOC) and Person-Centered Service Plan (PCSP) process**
 - For applications submitted in MWMA:
 - All LOC assessments and PCSPs must be submitted within MWMA.
 - For applications not submitted within MWMA
 - The initial LOC assessment should be faxed to Carewise Health at (800) 807-8843. When LOC is met, submit the PCSP in MWMA. All

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subsequent LOC assessments and PCSPs must be submitted within MWMA.

- Upon approval of the PCSP, the case manager is to transition the person into MWMA and complete all subsequent LOC assessments and PCSPs within MWMA. All future applications for placement on the SCL waiting list must be submitted through MWMA.
- SCL Waiver Renewal
 - The Centers for Medicare and Medicaid Services (CMS) renewed the current SCL waiver application in spring of 2017. The official renewal was implemented on April 1, 2017. The SCL waiver renewal period is effective March 1, 2017 through February 28, 2022.
 - As of April 1, 2017, providers should be using SCL regulations [907 KAR 12:010](#) and [907 KAR 12:020](#). The regulations became effective June 3, 2016.
 - For documentation requirements after March 15, 2017, please see the SCL Provider Letter #A-49 on the next page. DMS will follow those documentation requirements, exceptional support protocols, and the guidance provided about billing audits and information on technical assistance included in the letter.

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CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR MEDICAID SERVICES

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Commissioner

March 1, 2017

SCL Providers (33)
Provider Letter # A-49

Dear Provider,

The Department for Medicaid Services (DMS), along with the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) and the Department for Aging and Independent Living (DAIL) are working with stakeholders on a Waiver redesign to address issues within the 1915c waivers. DMS is also working with the Centers for Medicare and Medicaid Services (CMS) for guidance and approval.

Further, the Departments have worked closely with providers to identify areas where system efficiencies can be operationalized prior to finalizing the Waiver redesign. These areas are listed below:

1. **Service Documentation.** Clarification on documentation requirements which includes allowing providers to utilize a monthly note for certain specific services;
2. **Recoupment and Technical Assistance.** Guidance on what may generate a recoupment during a billing audit and increase technical assistance efforts; and
3. **Exceptional Supports.** Simplify the exceptional support process.

For dates of service beginning March 15, 2017, DMS will follow the documentation requirements illustrated in Attachment A. Attachment B outlines the Exceptional Supports Protocol that will be followed and Attachment C provides guidance on billing audits and information on technical assistance. **Please maintain this letter and the attached documents for your records.**

Should you have questions, please contact the QA for your region or DMS.

Sincerely,

Stephen P. Miller
Commissioner
Department for Medicaid Services

Deborah Anderson
Commissioner
Department for Aging and Independent Living

Wendy Morris
Commissioner
Department for Behavioral Health, Developmental and Intellectual Disabilities



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- As of April 1, 2017, all exceptional support requests must be submitted through the [Medicaid Waiver Management Application \(MWMA\)](#). No exceptional support requests will be accepted via fax to DDID.