



Date: February 15, 2022

To: Community Living Assistance and Support Services Case
Management Agencies
Community Living Assistance and Support Services Direct
Service Agencies
Deaf Blind with Multiple Disabilities Providers

Subject: Information Letter No. 2022-13
HHSC Rate Changes and Support to CLASS and DBMD Case
Managers Processing IPC Revisions

HHSC has published Payment Rates for Community Living Assistance and Support Services (CLASS) (IL 2022-01) with an effective date of January 1, 2022 and Deaf Blind with Multiple Disabilities (DBMD) (IL 2022-02) with an effective date of March 1, 2022.

When are Individual Plan of Care (IPC) revision for rate changes required?

Case managers of both programs must review the current IPCs of their assigned individuals to determine if:

- CLASS Consumer Directed In Home Respite Services (SVC 11PV) has been funded at the rate set on September 01, 2019 (old rate).
- DBMD Consumer Directed Intervener Service Base - III (SVC 45V, 45AV, 45BV, 45CV) has been funded at the old rate.

These IPCs will require manual revisions developed by the Service Planning Teams (SPT). Rate changes to services that do not involve Consumer Directed Services (CDS) do not require the development of an IPC revision.

How to perform IPC revision for rate changes?

Since the required rate changes will involve CDS, the Case Manager must consult with the assigned Financial Management Agency (FMSA) representative to determine the amount of service units consumed or expected to be consumed prior to the effective date of the rate change. This amount of service units must remain funded at the old rate. Service units that are expected to be consumed on or after

the effective date of the rate change must be adjusted by the Case Manager to be funded at the newly set rate.

Case managers must use the Individual Program Plan to capture the funding of service units while applying old and new rate settings. The calculation of funding needs to be reflected by the Case Manager on a revised IPC.

How to transmit IPC revision for rate changes?

The preferred IPC submission method for IPC revisions for rate changes is the IDD Operations Portal. A submission must include:

- A selection of "Rate Change" as submission type;
- Uploaded copy of IPC reflecting funding at old and new rate;
- Statement of "2022 Rate Change" on the first page of the uploaded copy of the IPC;
- An Individual Program Plan capturing the calculation of service units at old and new rate.

How to verify that the rate change has been completed?

Case Managers are encouraged to use the Medicaid Eligibility Services Authorization Verification (MESAV) feature available per Texas Medicaid and Healthcare Partnership's (TMHP) TexMedConnect application to confirm that the rate changes have been completed as proposed by the SPTs.

Contact Utilization Review at 512-438-4896 for questions about the content of this alert.

Sincerely,

[signature on file]

Cynthia Kenneally
Director II, IDD/Hospice Utilization Review
Office of the Medical Director
Department Medicaid/CHIP