

# **Detroit Wayne Integrated Health Network**

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BULLETIN NUMBER: #20-005

**ISSUED/REVISED**: 05/01/2020

**EFFECTIVE:** 06/01/2020

SUBJECT: Retirement of H0043 and Use of H2015 (15 min.)

**SERVICE AFFECTED:** Community Living Support services (CLS), funded by Medicaid,

Healthy Michigan, SED Waiver, Child Waiver and HAB Waiver

### **IMMEDIATE ACTION:**

Effective 06/01/2020, as an IPOS or authorization for H0043 (per diem) expires, please make any new authorizations for unlicensed residential Community Living Supports (CLS) services with procedure code H2015 (15 min.).

All IPOSs and authorizations for H0043 that did not expire between 06/01/2020 and 09/30/2020 must be updated and authorizations for unlicensed residential Community Living Supports (CLS) services must be made with procedure code H2015 (15 min), prior to 10/01/2020. Effective 10/01/2020, MDHHS will retire the use of H0043 (per diem).

Please be advise that DWIHN will not make any exceptions to the timeliness requirements for submitting authorizations and claims for H2015 related to this code change.

#### **BACKGROUND:**

Historically, H0043 (per diem) and H2015 (15 min.) were the two CLS residential codes used for an unlicensed setting. Effective 10/01/2020, MDHHS will retire the use of H0043 (per diem) and remove it from the Code Chart.

Community Living Supports services provided in an unlicensed setting will now be reported in 15-minute units using H2015 and <u>not</u> H0043. Procedure code H2016 will continue to be used only for CLS provided in a specialized residential facility.

### **PROCEDURES:**

## 1. H0043 Fee Schedules & Authorizations

DWIHN will early terminate any current authorizations for H0043 (per diem), effective on 09/30/2020, that cross over the planned retirement date of 10/01/2020. DWIHN will also expire contract record fee schedules for H0043 effective on 09/30/2020. This will be done for all contract programs and for all populations.

# 2. H2015 Fee Schedule & Authorizations - AMI Population only

DWIHN will issue a revised AMI Residential rate sheet with new rates and new local modifiers for H2015 (15 min). DWIHN will early terminate any current authorizations, for the AMI population only, for H2015 (15 min) with no local modifier, effective on 09/30/2020. DWIHN will also expire contract record fee schedules for H2015 effective on 09/30/2020. DWIHN will also add new fee schedules for H2015, with the new rates and local modifiers, to the AMI Residential contract records, effective on 06/01/2020.

### 3. Claims

The process to submit claims for unlicensed residential services has not changed, only the reporting code and unit type has changed from H0043 (per diem) to H2015 (15 min), per MDHHS.

### **HOME HELP:**

Every beneficiary who receive CLS services in an unlicensed setting must apply for Adult Home Help or Expanded Adult Home services, as appropriate. The services funded by Adult Home Help are equivalent to Personal Care services in a licensed setting (see MDHHS Code Chart, Appendix page 7). Therefore, any Personal Care/Adult Home Help services can not be included in the calculations to determine the total time per day of CLS services needed. The total time of CLS services per day must be the net of Adult Home Help services (i.e., subtract the Adult Home Help time from the total amount of time of CLS services needed per day). As stated in communication from DWIHN in October 1, 2019, DWIHN will consider sanctions to ensure that providers make every effort to secure home help for beneficiaries living in unlicensed homes.

### **CHART:**

Conversion Chart: Hours to 15-minute Units									
H0043 Hours	H2015 15-Minute Units	H0043 Hours	H2015 15-Minute Units	H0043 Hours	H2015 15-Minute Units	H004 Hour		H0043 Hours	H2015 15-Minute Units
0.25	1	5.25	21	10.25	41	15.25	61	20.25	81
0.50	2	5.50	22	10.50	42	15.50	62	20.50	82
0.75	3	5.75	23	10.75	43	15.75	63	20.75	83
1.00	4	6.00	24	11.00	44	16.00	64	21.00	84
1.25	5	6.25	25	11.25	45	16.25	65	21.25	85
1.50	6	6.50	26	11.50	46	16.50	66	21.50	86
1.75	7	6.75	27	11.75	47	16.75	67	21.75	87
2.00	8	7.00	28	12.00	48	17.00	68	22.00	88
2.25	9	7.25	29	12.25	49	17.25	69	22.25	89
2.50	10	7.50	30	12.50	50	17.50	70	22.50	90
2.75	11	7.75	31	12.75	51	17.75	71	22.75	91
3.00	12	8.00	32	13.00	52	18.00	72	23.00	92
3.25	13	8.25	33	13.25	53	18.25	73	23.25	93
3.50	14	8.50	34	13.50	54	18.50	74	23.50	94
3.75	15	8.75	35	13.75	55	18.75	75	23.75	95
4.00	16	9.00	36	14.00	56	19.00	76	24.00	96
4.25	17	9.25	37	14.25	57	19.25	77		
4.50	18	9.50	38	14.50	58	19.50	78		
4.75	19	9.75	39	14.75	59	19.75	79		
5.00	20	10.00	40	15.00	60	20.00	80		

### **REFERENCES:**

**Michigan Medicaid Provider Manual** 

http://www.michigan.gov/mdhhs/0,5885,7-339-71551 2945 42542 42543 42546 42553-87572--,00.html

MDHHS Website: PIHP/CMHSP Provider Qualifications Chart

https://www.michigan.gov/mdhhs/0,5885,7-339-71550 2941 38765---,00.html

MDHHS Website: PIHP/CMHSP Reporting Cost per Code and Code Chart <a href="https://www.michigan.gov/documents/mdhhs/MHCodeChart">https://www.michigan.gov/documents/mdhhs/MHCodeChart</a> 554443 7.pdf

MDHHS Website: Home Help

https://www.michigan.gov/mdhhs/0,5885,7-339-71551\_2945\_42542\_42543\_42549\_42590---,00.html