Operations Memo 2013-05

TO: Private Providers with a Purchase of Service Contract for Residential and Day Services
FROM: Peter Mason, Director of the Operations Center
DATE: May 30, 2013

The fiscal year 2014 Op-Plan Software and Operational Plan User's Guide are attached and will be available on the DDS Website. The 2014 Op Plan loads onto a Microsoft Office Excel 2007 Spreadsheet and requires no additional software. The spreadsheet utilizes macros to complete various calculations. Set the security level of Excel to the lowest level when first loading the spreadsheet onto the computer. Refer to the instructions for more detail.

Changes have been made to FY 2014 Op. Plan to correspond with Medicaid Waiver reporting and billing requirements. The following are additional cost centers that have been added and for which providers will now be required to setup specific cost centers:

- The Cost Center Types have been modified on the Residential page. ADULT COMPANION (ADLT CMP), Behavioral Management (BEH), Healthcare Coordination (HLTHCR), and PERSONAL SUPPORT (PERS SUPP) have been added to the drop-down list. The name of the Community Training Home (CTH) program has been changed to Community Companion Home (CCH).
- The Cost Center Types have been modified on the Day page. Adult Day Health (ADULT DAY), and INDIVIDUAL DAY VOC AND NON-VOC (INDIV DAY) have been added to the drop-down list. The name of the Supported Employment Independent (SEI) program has been changed to Independent Supported Employment (ISE).
- Providers must have a separate cost center for each waiver support category (CLA – by each house, CRS – by each house, IHS, personal supports, adult companion, Healthcare Coordination, Behavioral Consulting, DSO, GSE, Sheltered, ISE, Individualized Day – vocational and non-vocational may be combined).

In an effort to reduce workload Providers may now combine most cost centers for like services (other than CLA and CRS). Prior to this year all cost centers were assigned to a specific Region. Starting in FY 2014, cost centers for like services may be combined and reported in the Prime Region. For example, if an agency has 5 DSO’s in 3 Regions, and is North Region Prime, they can now report 1 DSO cost center in the NR with all fiscal data combined. Individual Day Supports must have a separate cost center but Ind-Voc and non-Voc can be combined into the same cost center. CLA and CRS are still required to be reported separately and assigned to a specific Region.
Providers will still have the option of reporting Vendor Service Authorization (VSA) revenue in either the DDS contracted programs or in its own cost center. Providers opting to separate the VSA revenue participants from DDS contracted programs must now do so in its own cost center on the “Other” spreadsheet. As a reminder, all CLA and CRS programs must be broken out into a separate cost center for each setting.

In an effort to simplify the submittal process, providers should electronically submit to their assigned Operations Center Resource manager II the following:

- A letter of transmittal, certifying that the Op-Plan electronically submitted is a true and correct copy of the Op-Plan for FY 2014.
- The 2014 Op-Plan
- Staffing schedules – This will satisfy the FY 2014 contractual requirement of submitting staff schedules.

Refer to the “User’s Guide” for instructions regarding how to install and complete the Op-Plan 2014.

Please note: Due to the delay in distributing this material, the due date has been extended from May 1, 2013 to June 15, 2013. Providers may request from their assigned Operations Center Resource Manager up to an additional two week extension.

Should you have any questions, please call Sandy McNally at (860) 418-6025 or Peter Mason at (860) 418-6077.

Encl.
CC: Joseph W. Drexler, Deputy Commissioner
Regional Directors
Private ARDs
CCPA, CT Non Profits, ARC/CT
Mary Fuller, Chief Fiscal Officer
Pat Dillon, Operations Center Manager
Regional Resource Administrators
Resource Managers