



State of Connecticut  
Department of Developmental Services

Dannel P. Malloy  
Governor

Jordan A. Scheff  
Commissioner

Peter Mason  
Deputy Commissioner

**Operations Center Memo FY2018-10**

**TO:** DDS Providers

**FROM:** Peter Mason, Deputy Commissioner 

**CC:** Jordan Scheff, Commissioner, Regional Directors, Assistant Regional Directors, Private & Individual Family Support Directors, Resource Administrators, Siobhan Morgan, Scott McWilliams, DDS Operations Center, Resource Administrators, CT Community Nonprofit Alliance, The Arc of CT

**DATE:** March 12, 2018

**SUBJECT:** Per Diem Authorization Audit

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At a recent Department of Social Services (DSS) Audit training for Department of Developmental Services (DDS) providers, private providers were inquiring about the group day authorizations and the length of the service day. At issue, was the determination of the overpayment for paid services in which the standard hours (i.e., six (6) hours) were not met.

As background, the rates were first issued in 2004. The rate has been revised a number of times but the per diem rate was always based on a six (6) hour day. As DDS moved to transition providers to the day services rates, the length of day was increased over a five year period to the six (6) hour standard. DDS included in the Purchase of Service (POS) contract a provision that would allow providers to receive the full per diem amount for instances where the individual did not attend the standard six (6) hour day because of intermittent late arrivals and early dismissals. The contract provision states:

*Participant will be considered in attendance if supports have been provided for a minimum of three (3) hours and a full day of services was available. Contractors that routinely provide less than the standard minimum number of hours for a Participant and fail to notify the DDS Regional Resource Administrator will not be eligible to bill for a full day of service.*

As stated in the audit protocol discussed in the training, a recoupment of the full per diem rate would be made when providers are routinely providing less than the standard hours. The following changes to the protocol will be implemented immediately regarding the audit for the per diem authorizations for group day supports for all providers that have not received a final audit report from DSS:

**Services Performed through June 30, 2018:**

- A. Per diem unit attendance will receive no audit adjustments as long as:
- The unit was billed with the proper documentation,
  - The individual received at least the minimum number of support hours (currently three (3) hours),
  - A full day of service was available, and
  - The standard hours (currently six (6) hours) were met **OR** the standard hours were not met but did not occur on a daily basis or in a recognizable pattern ( ie. every day, every other day, every Friday afternoon, etc.).

- B. Per diem unit attendance will receive an hourly rate reimbursement based on the number of documented hours of support as long as:
- The unit was billed with the proper documentation,
  - The individual received at least the minimum number of support hours (currently three (3) hours),
  - A full day of service was available, and
  - The standard hours were not met (currently six (6) hours) and occurred on a daily basis or in a recognizable pattern (ie. every day, every other day, every Friday afternoon, etc.).
  - However, no audit adjustment will be made in which the provider has documented its notification to the DDS Regional Resource Administrator prior to billing the service that the minimum hours [currently three (3)] were met but the standard hours [currently six (6)] were not met.
- C. Per diem unit attendance will receive an audit adjustment for the full reimbursement if:
- The unit was billed without the proper documentation and authorization, or
  - The minimum number of hours of service was not provided.

**Services Performed July 1, 2018, and after:**

- A. Per diem unit attendance will receive no adjustment as long as:
- The unit was billed with the proper documentation,
  - The standard hours (currently six (6) hours) were met.
- B. Per diem unit attendance will receive the full reimbursement as long as:
- The unit was billed with the proper documentation,
  - The individual received at least the minimum number of support hours,
  - A full day of service was available, and
  - There are no more than six (6) days in a calendar quarter in which there was an occurrence of an intermittent late arrival or early dismissal that resulted in the individual not meeting the standard hours (currently six (6) hours).
- C. Per diem unit attendance will receive an audit adjustment for the full reimbursement if:
- The unit was billed without the proper documentation and authorization,
  - The minimum number of hours of service was not provided,
  - The standard hours (currently six (6) hours) were not met other than approved training days or inclement weather, or
  - The participant does not meet the standard hours (currently six (6) hours) for more than six (6) occurrences in a calendar quarter. The error will be applied to any occurrence that exceeded the first six occurrences of the applicable calendar quarter.
- D. At its discretion, the DSS auditor may amend the audit adjustment for verified intermittent late arrival or early dismissals identified by provider documentation for excessive doctor's visits, medical issues, or hospital visits. DSS will review the stated reason for the delay on the documentation and verify the reason through medical claims.
- E. At its discretion, the DSS auditor may amend the audit adjustment for excessive intermittent late arrival or early dismissals if the provider can document it had attempted to change the authorization from per diem to hourly but the authorization change was not completed in a timely manner. The provider must have documentation from the region (written authorization via email from the Regional Director, the Assistant Regional Director, the Resource Administrator, or the Planning & Resource Allocation Team (PRAT Manager)).
- F. Providers are to work with their regions to identify those authorizations that they would like to change from a per diem to hourly authorization. The regions will agree to make the change by July 1, 2018, as long as the following conditions are met:
1. The individual's team agrees with the change in authorization.
  2. No additional money can be awarded based on this change in authorization.
  3. The provider maintains a program that is open for six (6) hours and is available to the individual whenever the person wants to attend for the full day of service.
  4. No change in authorization can be made in order to allow the provider to decrease the program hours to less than the standard of six (6) hours.

If you have any questions, please contact me at [peter.mason@ct.gov](mailto:peter.mason@ct.gov)