

**DEPARTMENT OF SOCIAL SERVICES**  
**AUDIT PROTOCOL – DEPARTMENT OF DEVELOPMENTAL SERVICES WAIVER**  
**August 2017**

Listed are the most common audit findings for Medicaid home and community-based waiver services, and clarification of the criteria the Connecticut Department of Social Service (the "Department") uses when it makes those findings. Those services are then billed through the Federal Governments' Medicaid Waiver Program for reimbursement. Being the sole distributor of Medicaid funding to other State of Connecticut Agencies, the responsibility to ensure compliance with the governing laws and policies falls on the Department. Disallowances for home and community-based waiver services under the Medicaid programs are governed by policies included in the DDS Home and Community-Based Waiver Operations Manual (HCBS Manual), Purchase of Service contracts with providers, the Regulations of Connecticut State Agencies (Conn. Agencies Regs.), the Connecticut General Statutes (Conn. Gen. Stat.), the Application for Home and Community-Based Waiver Services, and the Code of Federal Regulation (C.F.R.). Please see the Contract Service Authorization (CSA) between DDS and the Provider of Medicaid Waivered services for varying, additional requirements, as well as directive memorandums generated by DDS to the Provider community.

<b>Audit Finding</b>	<b>Audit Criteria</b>	<b>Regulatory Reference</b>
Documentation - Individual's Records Not Available for Review	The Department will disallow payment for service if there is no individual case file available for review.	HCBS Manual Section 8 Purchase of Service Contract
Service Documentation - Not Available for Review	The Department will disallow payment if there is no service documentation for each date of service sampled. Provider must have at least one of the following service documentation for each individual for each date of service: <ul style="list-style-type: none"> <li>- Daily Individual or Group Activity Logs</li> <li>- Daily communication logs</li> <li>- Daily production data</li> <li>- Daily progress notes</li> <li>- Employment data, hours of paid work</li> <li>- Health/Clinical data</li> </ul>	HCBS Manual Sections 2 and 8 Purchase of Service Contract
Service Documentation - Incomplete	The Department will disallow payment if the service documentation does not meet the requirements of Section 2 of the DDS HCBS Waivers Operations Manual. Specific service documentation is required by procedure code. Listed at the end of this protocol is the service documentation required for the most common procedures.	HCBS Manual Sections 2 and 8 Purchase of Service Contract

Individual Progress Review (IPR) - Not Available for Review	The Department will disallow payment if the Individual Progress Review is not available for review within three months of the date of service for consumers in Community Training Homes (CTH) or within six months of the date of service for all other consumers.	HCBS Manual Section 4. and 4.2.1 Purchase of Service Contract
Payments - Hours Paid in Excess of Hours Documented	<p>The Department will disallow payments that are paid in excess of the attendance documentation when paid in hourly/15 minute unit increments. The financial disallowance is the difference between the number of units paid and the time documented. (Rounding the direct service time to the nearest unit increment)</p> <p>Examples of Rounding to the nearest 15 minute unit increment:</p> <ul style="list-style-type: none"> <li>- If service provided for 67 minutes, bill for 1 hour</li> <li>- If services were provided for 68 minutes, bill for 1.25 hours</li> <li>- If services were provided for 50 minutes, bill for .75 hours</li> </ul>	HCBS Manual Section 2., 4., 4.9.1, 8.3, 9., 9.3.c., 9.3.1 Purchase of Service Contract
Payments - Minimum Hours Not Met per Contract Service Authorization and/or Individual Plan	The Department will disallow payment for group day programs paid at a per diem rate if the amount of hours recorded on the attendance documentation does not meet the minimum hours per the Contract Service Authorization and/or the Individual Plan.	HCBS Manual Section 8.4 Purchase of Service Contract
Services - Program Services Not Utilized by the Individual	The Department will disallow payment if the service documentation indicates that the individual did not utilize the services. For example, when an individual is on vacation, absent, sick, cancels, refuses services, etc.	HCBS Manual Section 2., 6.1, 8.3, 8.4, 9. Purchase of Service Contract
Services - No Services Rendered by Provider	The Department will disallow payment if the Provider did not render the services. For example, In-Service Training, Holiday, Snow Day, etc.	HCBS Manual Section 2., 6.1, 8.3, 8.4 & 9. Purchase of Service Contract

Services - Concurrent Services	The Department will disallow payment for services if the individual is receiving services concurrently that are not allowed to be combined. For example, Group Day Service cannot be provided at the same time as Individualized Day Supports, Supported Employment, Adult Day Health, Respite, Personal Support, Adult Companion or Individualized Home Supports.	HCBS Manual Section 2., 2.2, 2.4, 2.5, 2.6, 2.7, 8.3, 8.4 & 9 Purchase of Service Contract
Service Documentation- Not Completed in a Timely Manner	The Department will disallow payment if the service documentation is not completed in a timely manner.	HCBS Manual Section 2 Purchase Service Contract
Services – Direct Service Time	The department will disallow payment for non-direct services, unless otherwise provided in the service definition. Direct service time is the period of time support is face-to-face with the participant.	HCBS Manual Section 2 and 9
Services – Staff to Participant Ratio	The Department will disallow payment for staffing-to-consumer ratio greater than 1:1 without authorization. Services should be provided with a staffing ratio of one direct service employee to the participant unless otherwise provided in the service definition or the service is in accordance with a group rate.	HCBS Manual Section 2
Limitations - Provider not listed on Contract Service Authorization.	The Department will disallow payment for service if the Provider is not listed on the Individual's Contract Service Authorization.	HCBS Manual Section 2., 6.1, 9, 9.3.1 Purchase of Service Contract
Limitations - Unqualified Provider	The Department will disallow payment for service if the Provider did not enter into a Provider Agreement with the Department of Social Services prior to receiving any payment for services.	HCBS Manual Section 2., 6.1, 7., 7.1, 7.2, 8.3 Purchase of Service Contract

Limitations - Unqualified Staff	The Department will disallow payment if the performer of the service does not meet the necessary qualifications to provide the service.	HCBS Manual Sections 2. and 7.
Payments – Exceeding Authorization	The Department will disallow payment if the service Provider has exceeded authorization annually and at the time of the date of sample.	HCBS Manual Section 1.4.2, 2, 4.9.1, and 9 Purchase of Service Contract
Payments - Paid Services Not Supported on the Contract Service Authorization and/or Individual Plan	The Department will disallow payment for services that are not included in the approved Contract Service Authorization/Individual Plan.	HCBS Manual Section 2., 4., 4.9.1, 8.3, 9., 9.3.c., 9.3.1 Purchase of Service Contract
Payments - Services Paid Not Consistent with Individual Plan	The Department will disallow payment if the specific services documented in the progress notes are not consistent with the implementation of the outcomes/goals/objectives as specified in the Participants Individual Plan.	HCBS Manual Section 2., 4., 4.9.1, 8.3, 9., 9.3.c., 9.3.1 Purchase of Service Contract
Payments - Wrong Procedure Paid	The department will adjust payment if the approved paid service differs from the documented service. For example, the paid service was for Individual Home Support, but the service documentation is for Group Day Support. The difference between the documented service and the paid service is the audit adjustment.	HCBS Manual Section 2., 4., 4.9.1, 8.3, 9., 9.3.c., 9.3.1 Purchase of Service Contract
Documentation - Individual Plan Not Available, Incomplete or Inaccurate-	The Department will disallow payment if the Individual Plan is not available, is inaccurate, or does not include the proper date of the report, who is to perform the services, name of the individual receiving services, duration of the services, and type of service, and the provider did not document its attempt to request the IP from DDS.	HCBS Manual Section 2., 4., 4.1.6, 4.1.7, 6.1, 8., 8.3 Purchase of Service Contract

Documentation - Contract Service Authorization and Individual Plan goals and/or services are not in Alignment-	If the type or amount of services listed on the Contract Service Authorization differs from the Individual Plan, the Department will adjust the paid service to the lowest cost service listed.	Purchase of Service Contract
Procedure - Transportation	The Department will disallow payment for service if the documentation from the Provider is not maintained. Service documentation should contain a record that documents the date that the service is provided, the specific activity that the person is being transported to/from, and the mileage or trips related to transporting the person. The signature of a representative from the Qualified Provider providing the transportation is required.	HCBS Manual Section 2.12
Procedure - Individualized Home Supports	The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a description of activities related to outcomes/goals/objectives, care or transportation provided to the person and the signature of the person providing the service.	HCBS Manual Section 2.1
Procedure - Personal Supports	The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a description of the activities related to outcomes/goals/objectives, care or transportation provided to the person and the signature of the person providing the service. This service shall not be provided while the consumer is attending a day program.	HCBS Manual Section 2.2
Procedure - Adult Companion Services	The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a description of the activities related to outcomes/goals/objectives, care or transportation provided to the person and the signature of the person providing the service. This service may not be used in combination with (as part of the same plan) Residential Habilitation.	HCBS Manual Section 2.3

<p>Procedure - Supported Employment Services</p>	<p>The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a description of the activities related to outcomes/goals/objectives, care or transportation provided to the person and the signature of the person providing the service. When supported employment services are provided at a work site where persons without disabilities are employed, payment should only be made for adaptations, supervision and training required by participants receiving waiver services as a result of their disabilities and the department will disallow payment for supervisory activities rendered as a normal part of the business setting.</p>	<p>HCBS Manual Section 2.4</p>
<p>Procedure - Group Day Service</p>	<p>The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, and a note on the activity related to the outcomes/goals/objectives, care or transportation of the person. The service delivery record can be bi-weekly or monthly and must be signed by the provider representative. The Department will disallow payment if the services are not delivered in or from a facility-based program or appropriate community locations.</p>	<p>HCBS Manual Section 2.5</p>
<p>Procedure - Individualized Day Support</p>	<p>The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a description of the activities related to outcomes/goals/objectives, and the signature of the person providing the service.</p>	<p>HCBS Manual Section 2.6</p>
<p>Procedure - Clinical Behavioral Support Services</p>	<p>The Department will disallow payment if the service documentation does not include the date of service, the start time and end time of the service for each date, a signature of the person providing the service, and documentation on the reason for the service, the outcome, and follow-up activities. The Department will also disallow payment if the service was not delivered in the individual's home or in the community as described in the treatment/support plan.</p>	<p>HCBS Manual Section 2.17</p>

Procedure - Healthcare Coordination	The Department will disallow payment if the service documentation does not include the date of the service, the start time and end time of the service, a signature of the person providing the service, and documentation on the reason for the service, the outcome, and follow-up activities. Services are to be performed by a registered nurse.	HCBS Manual Section 2.8
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