



State of Connecticut  
Department of Developmental Services

Dannel P. Malloy  
Governor

Jordan A. Scheff  
Commissioner

Peter Mason  
Deputy Commissioner

**Operations Center Memo 2018-14 - REVISED**

**To:** POS Contracted Private Day Providers

**From:** Scott McWilliams, Chief of Fiscal/Administrative Services

**CC:** Jordan A. Scheff, Commissioner, Peter Mason, Deputy Commissioner, Regional Directors, Private ARDs, IFS ARDs, Case Manager Supervisors, Case Managers, Resource Administrators, Bob Smith, Program Manager, Siobhan Morgan, Director of Medicaid Waiver, ARC of CT, CT Community Nonprofit Alliance, Inc.

**Date:** May 17, 2018

**RE:** **Per Diem to Hourly Communication Process**

At the April 2018 Department of Developmental Services (DDS) quarterly provider meeting, there was a discussion regarding the notification of an individual's team when converting a per diem authorization to hourly units. Providers requested a more streamlined process, in order to comply with the instructions detailed in Operations Center Memo FY2018-10.

As requested, DDS has developed a simplified process for providers to notify the individual's team while continuing to ensure that the Individual Plan and the person's authorization correctly identify the authorized supports being provided to the individual. The new process splits affected individuals into two categories:

**Category 1:** Individuals who regularly attend the standard day, but are expected to have more than six (6) days in a quarter in which there is an occurrence of an intermittent late arrival or early dismissal that result in not meeting the standard six (6) hour day.

**Category 2:** Individuals who do not attend the full six (6) hours on a daily basis or in a recognizable pattern (i.e. every other day, every Friday afternoon, etc.). This group includes individuals with chronic transportation issues that do not allow them to be present at the day program for the full six hours.

The following procedures are being issued to detail the actions required by the provider and the individual's team, in order to meet the requirements of Operations Center Memo FY2018-10:

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[www.ct.gov/dds](http://www.ct.gov/dds) ♦ e-mail: [ddsct.co@ct.gov](mailto:ddsct.co@ct.gov)  
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1. Providers requesting to convert a per diem authorization to hourly units must submit in writing one request per region to the Regional Resource Administrator. The request should be from the Executive Director or President of the agency and include the following:
  - a. The date of the request.
  - b. The reason for the request.
  - c. The number of individuals, by program, converting authorizations from per diem to hourly units.
  - d. A statement that the provider is not requesting any additional funding as a result of this change.
  - e. A statement that the program will be open for 6 hours and is available to the individual whenever the person wants to attend for the full day of service.
  - f. A list of individuals in **Category 1**, identified with DDS number, program location, and assigned case manager.
  - g. A list of individuals in **Category 2**, identified with DDS number, program location, assigned case manager and the total number of weekly hours the individual regularly attends the program.
2. The region will distribute the lists to the assigned case managers listed in the letter.
3. For individuals listed under **Category 1**:
  - a. The case manager will inform the team members of the change for all individuals listed under Category 1.
  - b. The letter will serve as notice to DDS and the team that the provider has identified all individuals in Category 1 as regularly attending the program for the standard day, but, due to specific challenges, there is a likelihood that the person will not consistently attend the total number of hours per week listed on the Individual Plan (IP).
  - c. At the next meeting of the individual's team, the IP will be revised to include the phrase "up to" along with the total number of hours the individual will be authorized to attend the day program. The total number must match that which is listed on the person's authorization.
4. For individuals listed under **Category 2**:
  - a. The case manager will inform the team members of the change for all individuals listed under Category 2.
  - b. The letter will serve as notice to DDS and the team that the provider has identified all individuals in Category 2 as not attending the program for the standard day on a daily basis or in a recognizable pattern.
  - c. No later than 90 days from the date of the letter, the case manager will meet or hold a teleconference with the team members for each individual listed under Category 2. The team will review the reason for each individual to be attending a non-standard program day and strategize on ways to increase the individual's hours at the day program, as appropriate.
  - d. The IP must be revised to adjust the total number of days and hours the individual is attending the day program.
    - For those individuals with an action plan to increase their attendance to the standard six (6) hour day, the IP will be revised to include the phrase "up to" along with the total number of hours the individual will be authorized to attend the day program. The total number must match that which is listed on the person's authorization. If the team adjusts the total number of hours the individual will attend the program, the Case Manager will notify regional resource management of the need to revise the authorization to match the IP.
    - For those individuals without an action plan to increase their attendance to the standard six (6) hour day, the IP should be revised to include the phrase "up to" along with the non-standard hours the individual attends the program. The Case Manager will notify regional resource management of the need to revise the authorization to match the IP.