

PROVIDER BULLETIN

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Adult Day Health Care Services Adult Day Care Waiver Services

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TERMINATION OF THE ADULT DAY HEALTH CARE SERVICE

As a result of program changes, adult day health care services will no longer be covered under the Missouri Medicaid State Plan. Adult day health care services will sunset June 30, 2013. Eligible participants will be transitioned into the new Adult Day Care Waiver or the adult day care service under the Aged and Disabled Waiver depending on the participant's age.

ADULT DAY CARE SERVICES

The Adult Day Care Waiver is a new home and community based waiver which provides adult day care services to active MO HealthNet participants ages 18 through 63 who meet nursing facility level of care. Adult day care services will also be available in the Aged and Disabled Waiver. The Aged and Disabled Waiver targets active MO HealthNet participants who are 63 years of age and older who meet nursing facility level of care.

The adult day care service provides continuous care and supervision of disabled adults in a licensed adult day care setting. Services include, but are not limited to, assistance with activities of daily living, planned group activities, food services, client observation, skilled nursing services as specified in the individual's plan of care, and transportation. Planned group activities include socialization, recreation and cultural activities that stimulate the individual and help the participant maintain optimal functioning. Meals which are provided as part of the adult day care service will not constitute a "full nutritional regimen" (3 meals a day). The provider must arrange or provide transportation to and from the adult day care facility at no cost to the participant.

REIMBURSEMENT AND SERVICE LIMITATIONS

Adult day care authorization must not exceed forty (40) units or ten (10) hours per day with a maximum of five (5) days per week. One unit equals fifteen (15) minutes. No more than two (2) hours per day will be reimbursed for transporting the participant to and from the adult day care setting.

PROC CODE	DESCRIPTION	MO HEALTHNET MAXIMUM ALLOWABLE AMOUNT
S5100 HB	Adult Day Care Waiver	\$2.14/15 min. unit
S5100 HC	Adult Day Care as a service in the Aged and Disabled Waiver	\$2.14/15 min. unit

ADULT DAY CARE PROVIDERS

- Providers are required to be licensed as an Adult Day Care facility and meet Adult Day Care program licensure rules set forth by the Department of Health and Senior Services. Providers must also meet the requirements of State Statute 660 RSMo before applying as a MO HealthNet provider.
- Providers are required to enroll with Missouri Medicaid Audit & Compliance (MMAC), Provider Enrollment Unit as an Adult Day Care provider. Current Adult Day Health Care providers will not have to re-enroll to provide these services.
- Providers are required to perform criminal/background investigations on staff that provide direct care to waiver participants prior to employment. Providers request these investigations through the Department of Health and Senior Services, Family Care Safety Registry (FCSR).
- Providers are required to make periodic checks of the Employee Disqualification List (EDL) to determine whether any current employee, contractor or volunteer has been recently added to the list. These checks are to be made at least every ninety (90) days by contacting the FCSR once the individual is registered and listed on the registry.

Please refer to the Department of Health and Senior Services Memorandum to all Home and Community Based Providers [PM-13-09](#) and [VM-13-10](#) dated March 18, 2013 for more detailed information regarding the transition of Adult Day Health Care participants into the Adult Day Care and the Aged and Disabled waivers.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD web site at <http://dss.mo.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

**Provider Communications Hotline
573-751-2896**