



Update on HCBS Minimum Fee Schedule for 1-2 bed OO AFH

November 26, 2024

Dear 1-2 bed OO AFH Provider:

The Wisconsin Department for Health Services (DHS) recently set a [minimum fee schedule](#) for Residential, Supportive Home Care, and SDS – Supportive Home Care services, that began on October 1, 2024. My Choice Wisconsin is writing to notify you of the expected changes to your 1-2 bed Owner Occupied Adult Family Home.

What this means for you

Care Management staff worked with providers and members to complete assessments in the months of September and October of 2024 to gather necessary data on the member's needs.

- You will be reimbursed at least \$6.38 per 15 minutes for the total hours of care and supervision a member requires per day, as documented in the member-centered plan.
- Due to the change in reimbursement structure all members will have a member-specific rate that will be sent to providers via a Single Case Agreement (SCA). A new authorization will be generated in MIDAS. Once you receive the SCA for a member, please review, sign, and return within 7 days of receipt of the SCA. If we don't hear from you within 7 days, we will consider your contract to be active and in effect at the new rate.
- Members at or **above** the new minimum required rate of \$6.38 per 15 minutes will remain at their current rate.
- Members with pre-October 2024 rates **below** the new minimum required rate will receive a new rate to reimburse the cost difference at the per 15-minute rate.

Claim Submission and Reimbursement Guidelines

- 1-2 bed Owner Occupied AFH providers will still bill a **per day** reimbursement rate as a Residential provider.
- While members placed in a 1-2 bed Owner Occupied AFH **are not** subject to the Tier levels, the members Tier level will be present on the authorization for billing purposes and on the Single Case Agreement (SCA).

- Providers **must** bill the appropriate code and modifier combination as shown on the member authorization and SCA.
- The table below is a reference of the code and modifier combinations you may find on your authorizations and the SCA.

Revenue Code	Procedure Code	Description	Modifiers
0240	T2031	1-2 Bed AFH Owner Occupied- Private	U1, U5, U7 U2, U5, U7 U3, U5, U7 U4 – Only to be added as a 4 th modifier if approved for dedicated staffing
0240	T2031	1-2 Bed AFH Owner Occupied- Shared Room	U1, U5, U7 U2, U5, U7 U3, U5, U7 U4 – Only to be added as a 4 th modifier if approved for dedicated staffing

- If you have already billed on the members current authorization for October 1 dates of service and forward, these claims will be recouped and repaid under the new authorization and reimbursement amount no later than 12/31/24. **You do not need to do anything.**
- If you have not already billed on the members current authorization for October 1 dates of service or after, please submit your claim with the new authorization and with the new reimbursement amount on the members SCA.
- Once an SCA and new authorization are received, providers are expected to bill using the correct rate and authorization number. If a member is billed on a closed authorization the claim may be denied, and a new claim will need to be submitted by the provider.

MCW will not be able to provide an estimated timeline for reprocessing specific claims by phone or e-mail.

Thank you for all you do on behalf of our members and communities!

Questions?

- If you have any questions or concerns, please email us at hcbsminimumfeeschedule@molinahealthcare.com. Please include your organization name, TIN, and NPI so we can best support you.
- Visit our dedicated webpage at <https://mychoicewi.org/providers/hcbs/>.