

CHAPTER

12

WAIVER TRACKING SYSTEM PROCEDURES

Eligibility Inquiry

Before you can key in a budget for processing and approval, you must verify that the individual is enrolled in the Waiver. You should receive a copy of the enrollment letter from the Waiver Enrollments Coordinator. However, you can also go on the WTS and verify that enrollment is complete. To verify this information, follow these steps:

- Sign on to the WTS and proceed to the eligibility menu (**ENMEN**).

- Select **ENINS** and enter the individual's SSN in the Key 1 position.
 - There are three types of eligibility status: Pending DDSN ("**P**"), Awaiting Finance Commission ("**A**"), and Enrolled ("**E**").
 - If an individual is "**E**" then he/she is enrolled in the Waiver and the budget can now be completed and approved (Eligibility can either be Current ("**C**") or Historical ("**H**").
 - If an individual is "**A**" then he/she is awaiting enrollment from SCDHHS. However, this is only a data entry step. The budget can now be completed and approved (Eligibility can either be Current ("**C**") or Historical ("**H**").

IF:

Elig Status **E** and Curr/Hist C
Elig Status **A** and Curr/Hist C

Elig Status **P** and Curr/Hist C

Elig Status (**E, A, or P**) and Curr/Hist H

THEN:

Individual is currently enrolled in the waiver
Individual has fulfilled the requirements of
Wavier eligibility and is only awaiting data
entry by SCDHHS

Individual has fulfilled some requirements
of wavier eligibility, but not all of them.

Individual is terminated or current status has
changed to A, P or E.

ENMEN	WVR010ENMEN	WAIVER SYSTEM ENROLLMENT MENU	"H" FOR HELP ____
_*	*SCREEN ID*	*DESCRIPTION*	*REQUIRED*
ENUPD	.....	UPDATE CURRENT ENROLLMENT	KEY1 F/C=A,C,D
ENLDT	.....	UPDATE LAST LOC RE-EVAL DATE	KEY1
ENINQ	.....	DISPLAY CURRENT ENROLLMENT	KEY1
ENINS	.....	DISPLAY CURRENT AND HISTORICAL ENROLLMENT	KEY1
ENINA	.....	INACTIVATE CURRENT ENROLLMENT	KEY1
ENREA	.....	REACTIVATE CURRENT ENROLLMENT	KEY1
BDMEN	.....	BUDGET MENU	
DSMEN	.....	DELIVERED SERVICE MENU	
TAMEN	.....	TABLES UPDATE MENU	_KEY LEGEND
TIMEN	.....	TABLES INQUIRY MENU	KEY 1 - INDIVIDUAL'S ID OR
PRINT	.....	PRINT MENU	LAST, FIRST NAME
MMENU	.....	WVR MAIN MENU	
STS	.....	SIGN ON TO SERVICE TRACKING SYSTEM	
BYE	.....	SIGN OFF COMPLETELY	
.	NEXT SCREEN	_____ F/C _	KEY1
			XMIT _

WVR010ENINS

WAIVER SYSTEM
DISPLAY ENROLLMENT RECORDS

HELP _

INDIV. ID 000000000

NAME JOE SMITH

LEVEL OF CARE DATE	ENROLLMENT DATE	ENROLLMENT END DATE	ENROLLMENT STATUS	TRANSACTION DATE	CURRENT OR HISTORICAL
07-03-1997	09-27-1997	00-00-0000	E	10-01-1997	C
	09-27-1997	09-27-1997	A	09-29-1997	H
	07-01-1997	09-26-1997	P	09-29-1997	H

. NEXT SCREEN ENMEN F/C _ INDIV. ID 000000000

END OF DATA

XMIT _

Initiating a Budget

After you have verified that an individual is awaiting or enrolled, you can proceed with completing the budget. The first time an individual comes into the system, you have to go through the **budget initiation process**.

- Proceed to the Budget menu on the WTS (**BDMEN**).
- Selected **BDUPD**, **enter “A”** in the F/C field, and enter the SSN of the individual in the Key 1 position and Xmit.
- Key in the budget begin date which will be the enrollment date that can be located on your enrollment letter or on the enrollment screen of the WTS. In **most** circumstances this date is the individuals' LOC date.
- Once this step is complete you can key in your budget.

****Note you will only do this when completing the budget for the first time. You will not have to do this step again for the same individual unless they lose their Waiver slot, terminate, and then reapply. For subsequent years when the budget rolls over, you will not need to complete this step.****

BDMEN

WVR010BDMEN

WAIVER SYSTEM
BUDGET MENU

"H" FOR HELP _

* SCREEN ID *	* DESCRIPTION *	* REQUIRED *
BDUPD	UPDATE BUDGETS	F/C; KEY1
BDAPR	APPROVAL OF BUDGETS	NONE
BDINQ	DISPLAY BUDGETS	KEY1
BDINA	INACTIVATE CURRENT BUDGET	KEY1
BDREA	REACTIVATE MOST RECENT BUDGET	KEY1
BDCOM	COMMENTS ON INDIV'S BUDGETS	KEY1
SSUPD	UPDATE SCHEDULED SERVICES.....	KEY1
ENMEN	ENROLLMENT MENU	
DSMEN	DELIVERED SERVICES MENU	_KEY LEGEND
TAMEN	TABLE UPDATE MENU	F/C - A(ADD),C(CHANGE),D(DELETE)
TIMEN	TABLE INQUIRY MENU	KEY1- INDIVIDUAL'S ID OR
PRINT	PRINT MENU	LAST, FIRST NAME
MMENU	WVR MAIN MENU	
STS	SIGN ON TO SERVICE TRACKING SYSTEM	
BYE	SIGN OFF COMPLETELY	

NEXT SCREEN _____ F/C _ KEY1 00000000

XMIT _

WVR010 BDUPD

WAIVER SYSTEM
UPDATE BUDGET

HELP ____

INDIVIDUAL'S ID: 000000000
APPROVED BUDGET 4936.00
ESTIMATED BUDGET 4936.00

NAME: JOE SMITH
TYPE WAIVER M

BUDGET DATA C

BUDGET BEGIN DATE 07012000 (MMDDYYYY)

BUDGET END DATE..... 06302001

APPROVAL LEVEL

PRIOR MEDICAL ADMISSION NO PROVIDER 251

NEXT SCREEN BDMEN F/C ____ KEY1 000000000

ENTER "C" TO CANCEL ____

XMIT _

Budget Completion

Prior to completing a budget, you must first ensure that all services are included on the STS. If day, residential, or job coach services are not already on the STS you cannot add them to the WTS. In addition, the funding for day services must be updated prior to adding it to the budget. To make this change proceed to the services menu on the STS (**SVMEN**). Select **CHGAT** and enter SSN in Key 1 position. The day service that the individual is receiving will be displayed along with the activity type (prevocational or day) and how it is currently being funded. Enter the effective date (which is the enrollment date/budget begin date) and change the funding to Waiver (“**W**”). If the individual’s activity has changed, you may also change it on this screen. However, please note that an individual that is receiving prevocational habilitation requires documentation from South Carolina Vocational Rehabilitation stating they do not qualify for their services.

Once these changes have been made, you can proceed with the budget completion.

- Proceed to the budget menu (**BDMEN**) on WTS.
- Select **SSUPD**, enter “C” in the F/C field, and enter SSN in Key 1 position.
- Select a contract period/budget by typing an “X”, tab to Xmit field, and xmit. Typically there will only be the current budget listed. (However, at the end of the contract period when you are closing out the old year and you have access to the new contract period, you will have a choice of two budgets).
- To add a service to the budget, tab to the Xmit field on the **SELECT SCHEDULED SERVICES** screen and press xmit.

Proceed to key in the information regarding each individual service on the **UPDATE SCHEUDLED SERVICES** screen.

Note: It is essential at this point to use the tab key to guide you through each section as opposed to using your mouse.

- **Program Number:** This is the number that uniquely identifies each program. The program number is a combination of the type of service, service code, provider number and program sequence number. The service must be on the STS before trying to add it to the budget.
 - When you are adding a support service (i.e. PCA, assistive technology, psychological services) you only need to key in an “**S**” for support along with the program number (i.e. assistive technology is S21) from the MR/RD Waiver Rate Table.
 - When keying in a residential service code or a day program service you will need to include the entire number (i.e. CTH II R0525104).

- **Service Name:** This field should be left blank.
- **The Begin Date and End Date:** this is the contract period which will typically be, 07012000-06302001, unless you are keying in a new budget in that case it will be the enrollment date that you used initializing the budget. The end date will always be June 30.
- **Actual End Date:** This field should be left blank.
- **Estimated time period:** place a “Y” for year. You can use the other choices, but it makes it very difficult when you are trying to complete budget revisions throughout the year.
- **Estimated units:** This is the number of units that you anticipate the individual will use during the contract period. If you are keying in residential or day services and you are starting in the middle of a contract period, you are going to need to calculate the units starting from the budget begin date to June 30 for the year. If you are adding for a complete budget year, you will use 365 units for residential habilitation and 260 units for day habitation/prevocational habilitation. In order to determine the units equivalence, refer to your Waiver Rate Table where you will find all support services (i.e. psychological services one unit = 30 minutes; PT one unit = 15 minutes; PCA one unit = one hour).

Please note: when adding residential habilitation, you need to take into account an individual that often goes home for the weekend. If you know for certain that an individual goes home every other weekend, you need to account for this in your budget and not include the standard 365 units. This also applies to day services, if you know that the individual routinely attends only 3 days per week.

- The exception to this rule is when you are keying in assistive technology, environmental modifications, private vehicle modifications, dental services, vision services, and audiology services. When keying in these particular services you will need to put 1 unit in the **Estimated Units** field and then key in the total cost in the **Estimated Total Cost** field. If you are asking for numerous items under assistive technology you would include the grand total. You would not add each specific item.
- **Estimated Total units:** This field cannot be entered on this screen. This is the expected total number of units of service to be provided to the individual throughout the budget period. The total is automatically calculated based on what has been entered for the estimated time period and estimated units when the service is approved.

- **Estimated Total Cost**: This is the expected total cost of the service for the entire budget year. This amount will be calculated using the rate from the rate table. This field cannot be entered on this screen unless you are adding assistive technology, environmental modifications, van modifications, dental services, vision services, and audiology services (as previously noted).
- **Override rate**: This field cannot be completed by a normal user.
- **Direct billed “D” or Board provided “M”**: Direct billed means that the service is to be billed directly to Medicaid (SCDHHS) who will then pay the provider. Board billed means that the DSN Board will be billed for the service. You will determine this by referring to the Waiver Rate Table and following the guidelines at the bottom of the table or refer to Board Billed versus Direct Billed Services for MR/RD Waiver table.
- **Service Description**: Typically you will need to type more than once sentence regarding the service you are requesting. In these circumstances you would need to place the following statement in the field: “**See BDCOM for comments**”. The **BDCOM** option is an area that you can use to add comments when you need to justify a service. The only time you would probably not need to use **BDCOM** would be when adding a simple service that requires little justification such as day, residential, or job coach services.
- **Do you wish to update services again?**: After the screen is completed you can choose to add another service by entering a "Y" which will return you to the **SELECT SCHEDULED SERVICE** Screen or "N" which will return you to the **Budget menu**. Tab through the Cancel field, and xmit.
- If you chose to add additional services the system will return you back to the **SELECT SCHEDULED SERVICES** screen and you would proceed as previously stated.

Once you have completed your initial budget, you will need to proceed to the **PRINT MENU** and print the **WVR450** report. Refer to instructions for printing waiver budgets and revisions for all details.

WVR010	BDINT	WAIVER BUDGET		HELP ___
		SELECT BUDGET		
INDIVIDUEL'S ID	000000000	NAME JOE SMITH		
BEGIN	END	PROVIDER	PROVIDER	SELECT
DATE	DATE	NAME	NUMBER	("X")
07012000	06302001	NO NAME PROVIDER.	###	x
_____				___
_____				___
_____				___
_____				___
				ENTER "C" TO CANCEL _
				XMIT _
END OF DATA				

Adding Comments

To add comments

- Return to the budget menu (**BDMEN**)
- Key in **BDCOM**, place a “C” in the F/C field, and SSN in the key 1 position.
- Select a contract period/budget by typing an “X”, tab to Xmit field, and xmit. Typically there will only be the current budget listed. (However, at the end of the contract period when you are closing out the old year and you have access to the new contract period, you will have a choice of two budgets). You will be presented with the **COMMENT SELECTION** screen.
- To enter comments, tab to xmit field, xmit, and proceed with typing in your comments to justify the services that you have requested.
- If you need more than one page for the comments, type “Y” beside **Continue Same Comments?**, tab to the Xmit field and xmit.
- When you are finished with the comments, type “N” beside **Continue Same Comments?**, tab to the Xmit field, and xmit.

To change a comment

- Type “X” beside the comment to be revised on the **COMMENT SELECTION** screen, tab to the Xmit field and press xmit.
- On the **COMMENTS** screen, make the needed updates
- Type “Y” or “N” to continue the same comment and xmit.

Note: You can only update comments that you have made.

To read a comment written by someone else,

- Type “X” beside the comment you wish to view on the **COMMENT SELECTION** screen, tab to Xmit field and press xmit.
- The selected comment will be displayed.
- After viewing the comment, tab to the Xmit field and press xmit to return to the **BDMEN** menu.

WVR010BDCOI

WAIVER TRACKING SYSTEM
COMMENT SELECTION

HELP __

ID: 000000000 _ NAME: JOE SMITH

PLACE AN "X" BESIDE THE DESIRED RECORD TO UPDATE/INQUIRE OR XMIT TO ADD
A NEW RECORD

TRANS DATE	HH	MM	SS	ENTERED BY USER	SELECT "X"
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					__
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					__
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					__
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					__

CANCEL __

XMIT __

END OF DATA

WVR010BDCOI

WAIVER TRACKING SYSTEM
COMMENT SELECTION

HELP __

ID: 000000000 _ NAME: JOE SMITH

PLACE AN "X" BESIDE THE DESIRED RECORD TO UPDATE/INQUIRE OR XMIT TO ADD
A NEW RECORD

TRANS DATE	HH	MM	SS	ENTERED BY USER	SELECT "X"
08212000	18	07	17	USER'S NAME	__
COMMENT 1ST 50 CHARACTERS				JOE NEEDS \$160.35 OF AT FOR REPAIRS TO HIS RIFTO	
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					
_____	__	__	__		__
COMMENT 1ST 50 CHARACTERS					

CANCEL __

XMIT __

END OF DATA

Printing Budgets and Revisions on the Waiver System

- From the Main Menu or Budget Menu (**BDMEN**) select **PRINT**, tab to xmit, and xmit.
- Select **RPTGP**, tab to xmit, and xmit.
- Type “X” beside **WAIVER BATCH REPORTS**, tab to xmit, and xmit.
- Type “X” beside the specific report that you wish to print, tab to the Xmit field and xmit.
- For the current, approved budget print **WVR310**.
- For an initial budget or budget revision print **WVR450**.

These two commands will take you to a screen where you will provide information regarding the individual.

See attached pages for examples.

PRINT

WVR099PRINT

WAIVER SYSTEM
REPORT MENU

"H" FOR HELP __

TRANSACTION

DESCRIPTION

RPTGP LISTS THE DIFFERENT GROUPS OF WVR REPORTS

MMENU MAIN MENU

STS SIGN ON TO STS

MARC SIGN OFF TO MARC SCREEN

BYE SIGN OFF COMPLETELY

NOTE: YOU MAY ALSO REQUEST ANY OTHER MENU WITHIN THE WVR SYSTEM.

. TRANSACTION _____

XMIT __

* Development Version *

WVR099RPTGP

WAIVER SYSTEM
REPORT GROUPS FOR WVR

HELP ____

GROUP	DESCRIPTION	SELECT (X)
01	WAIVER BATCH REPORTS	-
02	FISCAL ONLY REPORTS	-
03	PROVIDER SPECIFIC REPORTS	-
04	FUNDING BAND AND HOM BOARD DATA	-
05	SURB GROUP	-
—		-
—		-
—		-
—		-
—		-
—		-
—		-
—		-
—		-

ENTER "C" TO CANCEL _

XMIT _

END OF DATA

WVR099WVRRP

WAIVER SYSTEM
WVR REPORTS

HELP ____

GROUP 01 - WAIVER BATCH REPORTS

FUNCTION	REPORT DESCRIPTION	SELECT (X)
WVR300	TOTALS BY PROVIDER AND PROGRAM	-
WVR310	COST SCHEDULE OF WAIVER SERVICES BY INDIVIDUAL.....	-
WVR370	PROVIDER SUMMARY REPORT	-
WVR390	REGIONAL / STATEWIDE SUMMARY	-
WVR400	CONSISTENCY REPORT	-
WVR450	REPORT OF PROPOSED BUDGETS AWAITING APPROVAL	-
_____		-
_____		-
_____		-
_____		-
_____		-

ENTER "C" TO CANCEL _

XMIT _

END OF DATA

WVR099PARM1

WAIVER SYSTEM
REPORT PARAMETERS

HELP __

FUNCTION WVR310 COST SCHEDULE OF WAIVER SERVICES BY INDIVIDUAL
PRINTER NUMBER..... u893 CENTRAL OFFICE - COLUMBIA

USE PITCH SET UP FOR REPORT? y (Y,N)

ENTER ALL OF THE FOLLOWING PARAMETERS:

- 01 ENTER TYPE WAIVER: (M - MR/RD, H - HASCI) m_____
- 02 ENTER FISCAL YEAR: (YYYY) 2002_____
- 03 ENTER 1 OF THE FOLLOWING - INDIVIDUAL'S ID: 000000000_____
- 04 PROVIDER # OR "ALL":..... _____
- 05 -SUMMARY ONLY? (Y): _____
- 06 REGION: (2, 3, 4, OR 6): _____

This report allows the user to enter two lines of
Comments if needed:

RETURN TO THIS SCREEN _ (Y,N) ENTER "C" TO CANCEL _
PRINT WVR 01 XMIT _

WVR099PARM1

WAIVER SYSTEM
REPORT PARAMETERS

HELP _

FUNCTION WVR450 REPORT OF PROPOSED BUDGETS AWATING APPROVAL
PRINTER NUMBER..... u893 CENTRAL OFFICE - COLUMBIA

USE PITCH SET UP FOR REPORT? y (Y,N)

ENTER ALL OF THE FOLLOWING PARAMETERS:

- 01 ENTER APPROVAL LEVEL: (1-4) 1_____
- 02 ENTER 1 OF THE FOLLOWING - INDIVIDUAL'S ID: 000000000_____
- 03 PROVIDER # OR "ALL":..... _____
- 04 REGION: (2, 3, 4, OR 6): _____
- _____
- _____
- _____
- _____
- _____

RETURN TO THIS SCREEN _ (Y,N) ENTER "C" TO CANCEL _
PRINT WVR 01 XMIT _

Budget Approvals

When you complete an Initial Waiver budget or Waiver budget revision you must submit the **WVR450 Report** to your Supervisor for approval. Given certain parameters set-up within the system, some requests can be approved at the local provider level. Other requests will forward to CO for approval. Given the circumstance, your supervisor will return your request with a statement regarding approval. If your request went to CO, it is your responsibility to inquire regularly if your request has been approved. You will also want to check the **Comments** section frequently. There are certain circumstances when CO personnel might wish for additional information before approving your request. They will not E-mail you or call you; they will use the system to type in comments for your review. If these comments are ignored for several days, they will typically deny the request and you will have to start the process over again.

Verification of budget approval can be accomplished with the following steps.

- Go the budget menu (**BDMEN**)
- Select **BDINQ**, place a “C” in the F/C field, and include the SSN in Key 1 position.
- On the **BUDGET RECORDS** screen select the budget which you want to inquire with an “X”, tab and xmit.
- As was represented on **WVR450** Report you will see **approved budget** and **estimated budget**. If these numbers match then you can typically assume that your request has been approved; however, when doing a budget revision to change an already existing service the units could match, but your service **may** actually be denied. It is every important that you refer to your **WVR450** report to verify the specific number of units or funding approved is the same that you requested (For example, the budget already reflected 24 units of daily respite. You added 12 more units to total 36 units. You check the **BDINQ** screen and see 24 units as the estimated amount and the approved amount. Given this information you would determine that you request had been denied.)

Completing a Budget Revision

Prior to completing a budget revision to an existing budget, you must first ensure that all services are included on the STS. If day, residential, or job coach services are not already on the STS you cannot add them to the WTS. In addition, the funding for day services must be updated prior to adding it to the budget. To make this change proceed to the services menu on the STS (**SVMEN**). Select **CHGAT** and enter SSN in Key 1 position. The day service that the individual is receiving will be displayed along with the activity type (prevocational or day) and how it is currently being funded. Enter the effective date (which is the enrollment date/budget begin date) and change the funding to Waiver (“**W**”). If the individual’s activity has changed, you may also change it on this screen. However, please note that an individual that is receiving prevocational habilitation requires documentation from South Carolina Vocational Rehabilitation stating they do not qualify for their services.

- Proceed to the budget menu (**BDMEN**) on WTS.
- Select **SSUPD**, enter “C” in the F/C field, and enter SSN in Key 1 position.
- Select a contract period/budget by typing an “X”, tab to Xmit field, and xmit. Typically there will only be the current budget listed. (However, at the end of the contract period when you are closing out the old year and you have access to the new contract period you will have a choice of two budgets).
- To add a new service that does not currently exist to the budget, tab to the Xmit field on the **SELECT SCHEDULED SERVICES** screen and press xmit. You will proceed in the same manner as when you completed a new budget.

OR

- To make a change to a service already included on the budget, place a “C” by the service you wish to change, tab to xmit, and xmit.
- Tab to the **ESTIMATED UNITS** and enter the change.
 - If you are adding additional services you will add the number of additional units to what is already approved and include the total (i.e. 20 units of psychological services approved; 15 more needed; the amount keyed in would be 35 units). If you are deleting units, you will reduce the current approved amount to the desired amount. When adjusting Assistive technology, environmental modifications, van modifications, audiology, vision services, and dental services, you will tab to the **ESTIMATED TOTAL COST** and make adjustments in the same manner.

If you are deleting all units of a particular service on the budget you follow these steps:

- Proceed to the budget menu (**BDMEN**) on WTS.

- Select **SSUPD**, enter “C” in the F/C field, and enter SSN in Key 1 position.
- Select a contract period/budget by typing an “X”, tab to Xmit field, and xmit. Typically there will only be the current budget listed. (However, at the end of the contract period when you are closing out the old year and you have access to the new contract period you will have a choice of two budgets).
- To delete an entire service place a “D” beside the service in the F/C field, tab, and xmit on the **SELECT SCHEDULED SERVICES** screen. The system will automatically place your cursor at the **Do you wish to update services again?** Field. Place a “N” here, and proceed to the **Cancel Screen field**, where you will place a “D”, tab to xmit, and xmit. This process will delete the entire service from the budget.

As when you completed a new budget, you will need to print the **WVR450** report and submit to your supervisor for approval. Once you have received approval of the service you will need to print the **WVR310** and attach to your budget revision in your file in the designated area according to the Waiver Index.

If you only deleted a service, you do not need to submit the request to your Supervisor. You will only need to print a copy of the new, approved budget (**WVR310**) and file in the appropriate area of your file.

****Note:** When doing a revision, you do not make any changes to any other areas of the **UPDATE SCHEDULED SERVICES** screen other than the above stated areas.**

Board Billed versus Direct Billed Services for the MR/RD Waiver

Services that are always Direct-Billed (to Medicaid):

- Adult Vision Services
- Nursing Services (RN/LPN)
- Adult Dental Services
- Specialized Medical Equipment, Supplies, and Assistive Technology
- Prescribed Drugs
- Audiology Services

Services that are always Board Billed (to local DSN Board):

- Respite
- Environmental Modifications
- Residential habilitation
- Day Habilitation
- Prevocational Services
- Supported Employment Services
- Adult Companion Services
- Board Provided Personal Care Services

If an individual receives Day Habilitation or Residential Habilitation, the following services are Board Billed (to local DSN Board):

- Physical Therapy Evaluation and Services
- Occupational Therapy Evaluation and Services
- Speech Therapy Evaluation and Services
- Psychological Evaluation and Services
- Behavior Support Services

If an individual does not receive Day habilitation or Residential Habilitation, the following services are Direct Billed (to Medicaid):

- Physical Therapy Evaluation and Services
- Occupational Therapy Evaluation and Services
- Speech Therapy Evaluation and Services
- Psychological Evaluation and Services

Personal Care Services:

- If a personal receives Residential Habilitation services funded through the MR/RD Waiver, Personal Care Services are Board Billed
- If an individual does not receive Residential Habilitation services through the MR/RD Waiver, Personal Care Services are Direct Billed.

Private Vehicle Modifications:

- Private Vehicle Modifications can be Direct Billed if the individual chooses a provider that is enrolled with SCDHHS. If the provider is not enrolled, then the service is board billed.

Adult Day Health Care Services:

- Adult Day Health Service is **always Direct Billed unless** the individual receives Residential Habilitation funded through the MR/RD Waiver. If so, then the service is board billed.

To Inactivate a Budget

If for some reason an individual loses their Waiver slot, the budget must be inactivated and the individual must be disenrolled from the Waiver.

All services should be reconciled to reflect the actual usage through the **SSUPD** screen before inactivating the budget. The STS should also be updated to reflect transfers and/or discharges. Once you have completed these steps, please follow these procedures:

- Proceed to the budget menu (**BDMEN**).
- Select **BDINA**, key “C” in F/C position, and SSN in key 1 position and xmit.
- Select the budget, which you need to access by placing a “X” in the appropriate field, tab to the xmit field and press xmit.
- Key in the actual end date, which will be the date of disenrollment or the date the individual moved to a new county.

If the individual is moving to another provider, you must also contact the Cost Analysis Division at Central Office to request a provider transfer.

For individuals who will no longer be receiving the Waiver, complete the Waiver Disenrollment Form after the budget has been inactivated. Copies of the form should be sent to the Regional Field Office. The Waiver Enrollments Coordinator will terminate the Waiver enrollment. If the individual is **also** being closed on the STS, **the waiver enrollment must be terminated before the closure can be completed.**

