



## Claiming for Support Coordination Services for Individuals Enrolled in Supports Program or Community Care Program under Fee-for-Service

All claims for the provision of support coordination (SC) services for individuals enrolled in the Supports Program (SP) or Community Care Program under Fee-for-Service (CCP-FFS) are submitted through DXC/Medicaid. Vouchers are reserved for individuals in the Interim program.

- **If an individual loses Medicaid:**
  - SCA should begin the troubleshooting process immediately and document the guidance received, in both case notes and Monthly Monitoring Tool. Throughout the troubleshooting process, [DDD.MediElighelpdesk@dhs.state.nj.us](mailto:DDD.MediElighelpdesk@dhs.state.nj.us) will advise on the status of services and support coordination.
- **Once troubleshooting is complete and Medicaid is re-established:**
  - If there is no gap in coverage, SCA will submit claim directly to DXC/Molina
  - If there is a gap in coverage, SCA will receive written authorization from DDD to be paid via voucher, as long as SCA is meeting its monthly deliverables (completing and uploading the MMT) and assisting with the troubleshooting process. A copy of the DDD email authorizing the SCA to bill via voucher must be included with voucher submission.

### Initial SCA Assignment:

The **SC daily rate** is used when an individual enrolling in the SP or CCP-FFS is assigned to an SCA on any day other than the first of the month. Once the ISP is approved, daily rate prior authorizations are issued retroactive to the date the Participant Enrollment Agreement (PEA) was uploaded, the participant's 21st birthday, or the Medicaid eligibility date—whichever date is the most recent. The SC daily rate is only used when there is presence of a daily-rate deliverable of at least one case note indicating the service(s) that were provided during the partial month in which the SCA is claiming. The **SC monthly rate** is used for subsequent months as long as a monthly deliverable (approved ISP / MMT) has been met.

#### EXAMPLE

Individual is assigned to an SCA on January 7, PEA is uploaded on January 16, ISP is approved on March 5. Upon plan approval, prior authorizations are issued to the SCA going back to January 16.

In this scenario, the SCA can claim using the SC daily rate from January 16 (date of PEA upload) through January 31, as long as there is a daily rate deliverable of a case note (initial meeting with individual/family, work being done on PCPT/ISP, etc.) for this partial month. SCA cannot claim for February because there is no monthly deliverable (ISP is not approved). SCA can claim for March using the SC monthly rate (because ISP is approved). SCA can use the SC monthly rate for all subsequent months in which the individual is assigned to them and there is evidence of a monthly deliverable.

## SCA Reassignments:

The SC daily rate is used when an individual enrolled in the SP or CCP-FFS is reassigned to an SCA on any day other than the first of the month, as long as at least one deliverable is present indicating the service(s) provided during the days for which the SCA is claiming.

## Individual Discharged Mid-month from SP or CCP-FFS

The SC daily rate is used when an individual is discharged from SP or CCP-FFS on any day other than the last of the month, as long as at least one deliverable is present indicating the service(s) that were provided during the days for which the SCA is claiming.

## Individual Transfers Mid-month from SP to CCP-FFS or CCP-FFS to SP

The SC daily rate is used when an individual is discharged from one waiver program to enroll in another waiver program on any day other than the last day of the month. If SCA attempts to claim using the SC monthly rate, they will receive an error code.

### EXAMPLE

**Individual transitions from SP to CCP-FFS and CCP ISP is approved on January 15. SCA must claim using the SC daily rate from January 1 – 14 and again using the SC daily rate from January 15 – 31.**

## Claims using the SC Monthly Unit/Rate:

The SC monthly rate is used when an individual enrolled in SP or CCP-FFS is assigned to an SCA the entire month, Support Coordination services have been provided, and within that month a deliverable (ISP approval or completed Monthly Monitoring Tool) has been met.

## New ISP is Generated:

When a new ISP is generated—due to annual ISP, change in individual budget and/or tier assignment, or change in waiver program enrollment (for example, moving from SP to CCP-FFS)—**the SCA cannot submit claim for completing deliverables unless/until the newly generated ISP is complete.** Upon plan approval, the SCA can claim, as long as at least one deliverable is present indicating the service(s) that were provided during the days for which the SCA is claiming.

### EXAMPLE (NJCAT reassessment results in tier increase)

**On May 17, a new macro plan is generated due to a change in tier, and SC receives a Due List item giving 30 days for completion. New ISP is not in approved status until July 12.**

**In this scenario, SCA cannot submit claim in June because the new macro plan was not in approved status within 30 days. After the plan is approved on July 12, SCA can submit claim for June, as long as at least one deliverable is present (for example, Monthly Monitoring Tool is completed) indicating the service(s) that were provided during the days for which the SCA is claiming. Claiming can continue in July, since the ISP is back in approved status.**