PROGRAM INSTRUCTION

SUA-21-PI-01
Rescinds: SUA-20-PI-49

August 31, 2020

TO: Area Agency on Aging Directors
FROM: Cynthia Brammeier, Administrator
State Unit on Aging, Division of Medicaid & Long-Term Care

BY: Bob Halada, Program Manager
Gene Hahn, Federal Aid Administrator
Ben Stromberg, Program Manager

RE: New Care Management Calculated Value Process and Form C Revision

Care Management values and reimbursement changes are being implemented for service dates beginning 7/1/2020, and reimbursements submitted beginning in August 2020. This will bring all Care Management billing in line with the process for the new state fiscal year.

1) The value will be provided through the PeerPlace process, and will be manually added to Form C. Note: Form C will no longer be used to calculate the Calculated Value.
2) Effective 8/1/2020 for the July 2020 Care Management reimbursement request, all AAAs are to use the Peer Place process to calculate both the Calculated Value for Form C and the Client Responsibility. This ensures that the same underlying elements of calculations match, including the truncated format, to produce accurate and matching amounts.

Background: In collaboration with Peer Place and the AAAs, the SUA determined a difference between the truncated rate per client vs. the AAA total value, for Care Management billing purposes. This occurs when truncating the amount to a currency format of two decimal places for each client and then adding each individual value to determine the total Calculated Value. For example, $38.1894, would truncate to $38.18. The SUA tested this with even and uneven dollar figures for the Approved Rate. The even amount of $54.00, also has the variance if used. Further research and testing determined the Peer Place process for calculating the Client Responsibility mirrored that of Calculated Value. The difference was less than one dollar on Form C (in yellow).

<table>
<thead>
<tr>
<th>TOTAL CASEWORK</th>
<th>ANNUAL ESTIMATE</th>
<th>YTD</th>
<th>CURRENT MONTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Units (Hours):</td>
<td></td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>Approved Rate:</td>
<td></td>
<td></td>
<td>Need Rate</td>
</tr>
<tr>
<td>Calculated Value:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.
The new process is provided below.

The Calculated Value is the billable expense for each Care Management client, truncated individually, and then totaled. This value is calculated by Peer Place and found in the Provider Billing program.

The Care Management Reimbursement Instructions for Area Agencies on Aging document has been updated to reflect, step by step, how to find the calculated value.

If you have questions, please contact the State Unit on Aging at 402-471-2307 or via email at DHHS.Aging@nebraska.gov.