



December 19, 2017

To: All Certified Independent Providers

From: Amber C. Gibbs, General Manager, Community and Medicaid Services Department

Effective February 1, 2018, Independent Providers are required to follow certain requirements when providing services to individuals that total more than 40 hours per work week (defined as Sunday through Saturday) as outlined in OAC 5123: 2-9-03. It is the responsibility of every Independent Provider to be familiar with the requirements in that rule. County Boards must develop a process for authorizing overtime (hours worked over 40 in one week for any individual or combination of individuals receiving services). This letter is to notify you of the process that CCBDD will use.

CCBDD, people served, and Independent Providers will work collaboratively to efficiently use available resources and to the extent possible, reduce the need for overtime. **Independent Providers must inform a person's Support Administrator (SA) of the number of people for whom they provide Medicaid-funded services anywhere in the state and the number of hours of services for each person.** This should include individuals for whom you are authorized to provide "backup" services in case the typical provider is not available.

Support Administrators will typically plan with each person to identify providers of services and authorize hours in a way that limits or reduces the need for an Independent Provider to routinely work more than 40 hours in a work week. In some situations, a provider may work more than 40 hours but may not exceed 60 hours in a given work week (for all persons served). In these cases, the Support Administrator and team will work to identify ways to reduce the need to those hours in excess of 40 in one work week, which may include identifying additional providers or use of remote technology and supports.

In rare cases in which certain "known events and circumstances" exist, an Independent Provider may provide more than 60 hours of service in one work week, but only if the criteria outlined in the rule are met. These criteria are outlined here:

Known Events or Circumstances:

Known events or circumstances will be identified by the person served and their team. The authorization for the Independent Provider to exceed the 60 hour per work week limit will be identified in the person's Individual Service Plan for these specific criteria:

- Scheduled travel or surgery of the person, the person's family member, or the person's provider
- Holidays or scheduled breaks from school
- The person has a compromised immune system and may be put at risk by having additional providers
- The provider is the only provider that has been trained by a nurse on delegated tasks or trained by a behavioral specialist to implement unique behavioral support strategies
- A shortage of other available providers

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The planning team will work with the person served to develop and implement a plan to eliminate the circumstances that necessitate the Independent Provider to exceed the 60 hour limit.

Authorizations over 60 hours per work week for these reasons MUST be discussed by the team and approved in advance. If the provider fails to share this information and receive authorization in advance of these known events, CCBDD will not retroactively authorize these services to the provider, which will result in loss of payment for services.

Emergency Circumstances:

When an emergency necessitates an independent provider to exceed 60 hours per work week, the Independent Provider is required to notify the Support Administrator in accordance with CCBDD's procedure within 72 hours of the events or circumstances creating the emergency and report the hours the provider worked for the overtime authorization to be considered.

Independent Providers must use the CCBDD Overtime Authorization Request Form to notify the Support Administrator in these situations. The form is to be used for emergency circumstances only. The details of the emergency must be included on the form.

Independent providers must email the completed form requesting overtime authorization to the Support Administrator. Your email will provide you with an electronic receipt including the date of the request in order to verify the 72 hour timeframe. If it is not possible to submit via email; requests can also be submitted via fax.

This process and the Overtime Authorization Request Form will be effective February 1st, 2018. A copy of the form is attached and can also be found on the Provider Search Tool (<https://providers.cuyahogabdd.org>) and on the Provider Support Webpage (<http://www.cuyahogabdd.org/en-US/About-Provider-Resources.aspx>). Support Administrator email addresses can also be found on the Provider Support Webpage.

Any revisions to this process and/or form will be posted on the CCBDD website at least one month in advance, and will be electronically mailed to providers using our mailing list. Providers are responsible for updating CCBDD when contact information including email addresses change.

If you have any questions about this letter or process, please contact Jennifer Krzynowek, Manager of Provider Development and Quality, or anyone in our Provider Development and Support Department at (216) 931-7474 or via email at provider.support@CuyahogaBDD.org.