

Children’s Developmental Disability Program Frequently Asked Questions for Providers

Question	Answer
<p>1. When implementing a child’s plan of service, can group services be provided if only individual is authorized on the plan?</p>	<p>No. In order to bill for group and/or individual, the service delivery method (group or individual) must be listed on the plan.</p>
<p>2. When implementing a child’s plan, is there flexibility on the number of individual or group hours that are provided?</p>	<p>Yes. As long as both group and individual service delivery methods are listed on the plan, there is flexibility on the number of hours that are provided. Changes to the delivery method should be based on the child’s response to therapy, requested by the family, and documented on the child’s status report.</p>
<p>3. How are changes made to the plan of service?</p>	<p>At any point during the plan year the family or provider may request changes be made to the child’s plan of service by doing the following:</p> <ul style="list-style-type: none"> • The family may contact their case manager to talk about making changes to the services. • The family may discuss changes with their provider, who can contact the family’s case manager to request changes. <p>The case manager will make an addendum to the plan of service based on the family’s suggestions, and will ensure that the changes are not over the child’s budget. The case manager will send the provider the addendum to the plan of service identifying the changes.</p>

Question	Answer
<p>4. Is family training allowed for individuals other than the child's parent or legal guardian?</p>	<p>Yes. Family training may be provided to the participant's parent or legal guardian, paid care givers, and individuals such as a foster parent, when they are acting in the parental role. The child must be present during family training.</p>
<p>5. What is interdisciplinary training and how is it billed by the developmental disability agency?</p>	<p>Interdisciplinary training is professional instruction to the direct service provider that provides assistance to meet the needs of children on a waiver program and encourages collaboration between direct service providers. Interdisciplinary training must only be provided during the provision of a developmental disabilities support or intervention service.</p> <p>This service will be provided on the same date of service at the same time. The developmental disability agency (DDA) will bill interdisciplinary training and the provider will bill for the appropriate procedural code for the direct service.</p> <p>The billing code is 99368 and is billed 1 unit = 30 minutes.</p>
<p>6. Can a professional provide interdisciplinary training to a habilitative support staff?</p>	<p>Yes. A professional qualified to provide interdisciplinary training can provide that training to a habilitative support staff. The professional provides instruction to the habilitative support staff while that staff delivers direct support services to the child.</p>
<p>7. What are examples of acceptable billing for interdisciplinary training?</p>	<p>Professional with Professional: When a speech-language pathologist (SLP) is scheduled for interdisciplinary training with a habilitative interventionist, the SLP is providing the direct service to the client and bills SLP, and the habilitative interventionist bills interdisciplinary training.</p> <p>Professional with Paraprofessional: When interdisciplinary training is needed for a habilitative support staff, the professional must always bill interdisciplinary training since it is a professional service, and the support staff must always bill habilitative supports.</p>

Question	Answer
<p>8. Can interdisciplinary training be provided to school providers?</p>	<p>Yes. If the staff is qualified to provide interdisciplinary training and the interdisciplinary training is identified on the plan of service. The provider will need to ensure that the interdisciplinary training is professional instruction to the direct service provider. Interdisciplinary training must only be provided during the provision of a support or intervention service.</p>
<p>9. Can therapeutic consultation be billed for time spent meeting with the school?</p>	<p>If the therapeutic consultant is gathering information from the school to help develop a positive behavior support plan for the child in the community, then the billable time would be counted towards the community benefit of up to 18 hours per year.</p> <p>If the need is to address the behavior in the public or charter school setting, there is a school-based service called behavioral consultation that should be provided for this purpose.</p> <p>Community therapeutic consultants can contract with the school to provide behavior consultation in the school environment, and the time would be subject to the school limitations of 36 hours per year. The school is responsible for billing for the service.</p>
<p>10. Can DDA staff provide respite in the staff's own home?</p>	<p>No. Respite can be provided in the home of the participant, in the home of an independent respite provider, a DDA, or in the community.</p>
<p>11. Can group respite be provided in the home?</p>	<p>Group respite can be provided in the participants' home, as long as respite is taking place in the home where the participants live. Independent respite providers cannot provide group respite.</p>

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<p>12. Can respite, habilitative supports, or habilitative intervention be provided by the participant’s parent or legal guardian?</p>	<p>No. A person who is legally responsible for the child cannot provide waiver services.</p> <p>A legally responsible individual is any person who has a duty under state law to care for another person and typically includes:</p> <ul style="list-style-type: none"> • The parent (biological or adoptive) of a minor child or the guardian of a minor child who must provide care to the child. • A spouse of a waiver participant. Except at the option of the state and under extraordinary circumstances specified by the state, payment may not be made to a legally responsible individual for the provision of personal care or similar services that the legally responsible individual would ordinarily perform or be responsible to perform on behalf of a waiver participant.
<p>13. Can respite be provided by a relative who is not the participant’s legal parent or guardian?</p>	<p>Yes. Respite is the only service that may be provided by the participant's relative, as long as the relative is not the participant’s legal parent or guardian. The relative must be qualified to provide the service.</p>
<p>14. Can a clinical supervisor be employed part-time or contract with the agency?</p>	<p>Yes. The clinical supervisor can either be employed or contracted with the agency. The clinical supervisor needs to be on-site and readily available for the staff they are supervising. It is the responsibility of the agency to determine how they will meet the specific duties identified for the clinical supervisor per IDAPA.</p>