

**FMSA Quarterly Webinar
January 24, 2023
Questions Report**

Consumer Directed Services (CDS) Policy Updates

Q1: Can a CDS member receive services out-of-state?

A1: Out-of-state travel policies can vary by Medicaid program. Please contact your MCO or waiver program listed below for program-specific travel policies.

CLASS: ClassPolicy@hhs.texas.gov

DBMD: DbmdPolicy@hhs.texas.gov

HCS: HCSPolicy@hhs.texas.gov

TxHmL: TxHmlPolicy@hhs.texas.gov

MDCP: MdcpPolicy@hhs.texas.gov

You may also contact the CDS mailbox at CDS@hhs.texas.gov for assistance.

For questions about using EVV while traveling, please contact EVV@hhs.texas.gov.

Q2: Can FMSAs give feedback on the CBT Training?

A2: Content of the FMSA enrollment computer-based training (CBT) for applicants wishing to contract with HHSC will mirror current training content. Therefore, HHSC does not anticipate soliciting feedback on the CBT at this time. Updates to any training content will be provided by HHSC staff and subject matter experts as needed.

Q3: Is it mandatory to run the background [checks] monthly?

A3: [Appendix II](#) of the Consumer Directed Services (CDS) handbook outlines the monthly requirement to identify individuals or entities excluded from participation in federal health care programs:

Please also see TAC [§41.227](#), Required Registry Checks, which requires the CDS employer to:

(d)(1) submit to the FMSA, for each applicant, contractor or vendor, the information required to conduct a monthly check of the Texas Health and Human Services Commission (HHSC) - Office of Inspector General (OIG) List of Excluded Individuals/Entities and the United States Department of Health and Human Services (HHS) - OIG Excluded Individuals/Entities Search online searchable databases; and

(2) not employ an applicant, contractor or vendor or immediately discharge an employee, contractor or vendor if listed on the HHSC or the HHS List of Excluded Individuals and Entities.

(e) An employer must obtain and maintain a copy of completed Form 1725 documenting the results of the registry checks.

Q4: How do we get a copy of the handbook?

A4: The Consumer Directed Services (CDS) handbook can be found on the HHSC website at this link: [CDS Forms and Handbooks | Texas Health and Human Services](#).

Electronic Visit Verification

Q1: EVV Policy Update – Will Datalogic be a vendor for the next two years? Will the software vendors change?

A1: At this time, we do not know who the vendor will be. It will be announced around March and will be effective August 1, 2023.

Q2: What is the effective date for the 1722 update?

A2: This form is still in the review stage. We are hoping to get it out soon.

Q3: Will the FMSA be able to change clients already onboard that have not submitted a 1722 to Option 3?

A3: The system automatically defaults to act as Option 3 if the option selection is not noted in the EVV system.

Individualized Skills and Socialization for FMSAs

Q1: Can caregivers who live with the client in the home continue to work through the end of the emergency declaration? (For TxHmL/HCS programs)

A1: HHSC released [IL 23-06](#) on January 20, 2023 to extend the temporary allowances related to in-home day habilitation until February 28, 2023. If an individual is currently receiving In-Home Day Habilitation through this flexibility, program providers should continue to provide and bill for In-Home Day Habilitation through February 28, 2023. HHSC will issue new guidance in February about the transition of this flexibility to in-home individualized skills and socialization during the public health emergency.

Q2: What determines the enhanced staffing need in regards to staffing ratio?

A2: The enhanced staffing rate is available if the individual requires more support from a service provider than the individual would receive with the individual's assigned level of need (LON). The requirement for additional support may be because of the individual's mobility, medical, or behavioral needs.

Q3: Can the entity providing the Individualized Skills & Socialization also provide out-of-home respite at the end of the day? If can bill out of home respite, must they max out the daily hours allowed of Skills and Socialization before they can bill out of home respite? Any guidelines that must be only for late after hours pick-up or can bill everyone at the end of the day?

A3: In accordance with [§262.915](#), an individual may only receive 6 hours per calendar day of individualized skills and socialization. Any additional services provided on the same day would need to be in compliance with the [TxHmL Billing Requirements](#).

Q4: Confirm: Daily Hourly max number of hours of Individualized Skills and Development, and weekly max number of days for this service also.

A4: In accordance with [§262.915](#), an individual may receive 1,560 hours during an IPC year; six hours per calendar day; and five days per calendar week.

Q5: Since the Individualized Skills and Socialization was effective 1/1/23, if an IPC is being renewed in February 2023, can we make the ISS effective on the date of the renewal? We originally thought that it could not be effective prior to 3/1/23.

A5: HHSC released [IL 23-03](#) on January 9, 2023 to provide guidance about the automatic service authorizations to allow program providers, LIDDAs, and FMSAs additional time to update service plans while ensuring continuity of services for the individual. Once a program provider is able to obtain a licensed on-site and/or off-site individualized skills and socialization provider they are able to submit a claim for individualized skills and socialization.

Q6: Can you explain more about the ISS rates? We were previously on a per diem rate, but now this appears to be hourly. Is there a minimum or maximum hourly requirement per day? Will the new IPCs show hours as units instead of days?

A6: Provider Finance will need to provide specific information about the rates for individualized skills and socialization. While there is no minimum number of hours, in accordance with [§262.915](#), an individual may only receive 6 hours per calendar day of individualized skills and socialization. HHSC is working to update forms, including the IPC, to reflect the new service. Please contact HHSC Provider Finance at PFD-LTSS@hhs.texas.gov for specific information about the individualized skills and socialization rates.

Q7: Are the rates just based on Step 4 of the rate enhancement?

Q7: Please contact HHSC Provider Finance at PFD-LTSS@hhs.texas.gov for specific information about the individualized skills and socialization rates.

FMSA Contract, Fiscal & Tax Compliance

Q1: What can we do if we've already called IRS & get no answer and also faxed SS4 with no response?

A1: HHSC cannot make recommendations for the IRS or TWC; however, if FMSAs have not received a response from the IRS in 14 business days it is best resubmit Form SS-4 via the online portal at [EIN Portal](#). Form SS-4 should be completed online for best results. FMSAs may contact the IRS at 800-829-1040 for assistance. Please be aware of the extensive menu and expect long wait times. Tax help for your business is available at [IRS.gov/Businesses](#). You can download or print all the forms and publications you may need on [IRS.gov/FormsPubs](#). Otherwise, you can go to [IRS.gov/OrderForms](#) to place an order and have forms mailed to you. You should receive your order within 10 business days. FMSAs may also go to their local IRS agency for in-person assistance.

Q2: Question on the tax portion: If the FMSA is submitting a report which indicates no services for the quarter (therefore, no taxes for the quarter), is the FMSA monthly fee payable to the FMSA for the month that the report is done?

A2: FMSAs must file quarterly tax reports even if no services were provided to the individual. Failure to submit a zero wage report to TWC will result in late report penalties. The FMSA may bill the monthly fee for the month in which the zero wage report was submitted as the FMSA has provided the financial management services (FMS) to the individual as described in TAC [§41.309](#). FMSAs cannot bill their monthly fee when no FMS were provided for that month.