

# **Enrollment Worksheet Instructions**

## **Fiscal Year 2023 Deaf-blind Multiple Disabilities (DBMD) Waiver**

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**Provider Finance Department, Long-Term  
Services and Supports  
Texas Health and Human Services  
Commission (HHSC)**

**July 1 – August 1, 2022  
Enrollment for Levels to be Effective  
September 1, 2022**

NOTE: These worksheets are provided for your own information and may be retained in your files for future reference. **Do not return** them to the Texas Health and Human Services Commission.



**TEXAS**  
Health and Human  
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# Instructions

## Purpose

This worksheet is a resource to help providers calculate spending requirements and potential differences between costs and revenues under the Attendant Compensation Rate Enhancement. Providers can use this information to decide about participation in the enhancement program.

## Reminder of Important Change

Effective September 1, 2012, participants contracted for DBMD services are accountable for spending requirements for Supported Employment and Employment Assistance attendant units at the same level as was awarded for Day Habilitation and other services within this program. When completing Enrollment Worksheets, providers of these services must also complete separate worksheets for these services when estimating the level they want to request.

## Reporting Period

Select a reporting period representing your typical caseload and staffing as close as possible to the open enrollment period. The reporting period may be of any length, but we recommend a minimum of one payroll period. For example, the reporting period might be one payroll period, one month (i.e., June 1 to June 30), or your most recent cost-reporting period.

We recommend checking for data inconsistencies and calculation errors. It is also recommended to complete worksheets for two different reporting periods at least three months apart and compare the results. Significant variances indicate an error in completing the worksheets or large fluctuations in caseload and staffing. Please consider any such variations when making your enrollment decision.

## Assistance

For assistance with the completion of these forms, contact the Texas Health and Human Services (HHSC) Provider Finance Department (PFD) at: [PFD-LTSS@hhs.texas.gov](mailto:PFD-LTSS@hhs.texas.gov) or (737) 867-7817.

## **Elimination of Grouping Contracts**

Changes to Title 1 Texas Administrative Code (1 TAC) Section 355.112(ee) changed the timing of requests for grouping, effective April 1, 2012. Providers will no longer have the option of grouping during this Fiscal Year 2023 Open Enrollment. Instead, providers may request that HHSC PFD aggregate (also known as grouping) the contracts when submitting the cost report covering the fiscal year of the awarded enhancement level. HHSC PFD recommends completing the worksheets for the contract you plan to aggregate at the end of the reporting period. You may also complete worksheets for individual contracts to compare with the aggregated results.

## **Levels of Enhancement**

Contracted providers must request a specific enhancement level to participate in this optional program. Please refer to the Enrollment Contract Amendment for information on requesting a level. Providers may request a level within the proposed range. Therefore, HHSC PFD recommends that you complete the worksheets for your requested level to inform your decision. Funds may not be available to grant all requests. Please consult the "Participation Status – Levels Awarded List" (posted by September 17, 2022) on the HHSC PFD website to learn your final awarded level for this program. HHSC will not distribute award letters. The PFD website is the sole source for information about awarded levels.

## **Worksheet Functionality**

The enrollment worksheets are fully functional. If completed online, they will perform all required calculations for you. If you choose to print the worksheets and fill them out by hand, you will be responsible for the accuracy of all mathematical calculations.

# Definitions

## Attendant

- An attendant is an unlicensed caregiver providing direct assistance to clients with Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs).
- Attendants do not include:
  - ▶ The director
  - ▶ Administrator
  - ▶ Assistant director
  - ▶ Assistant administrator
  - ▶ Clerical and secretarial staff
  - ▶ Professional staff
  - ▶ Other administrative staff
  - ▶ Licensed staff
  - ▶ Attendant supervisors, unless delivering attendant services to prevent a break in service.

Attendant expenses must be direct costed to be allowable for the Attendant Compensation Rate Enhancement Program. Direct costing requires daily timesheets documenting time spent performing attendant services for the contract. For Intervener services, Intervener I, Intervener II, or Intervener III are not eligible to participate in the Attendant Compensation Rate Enhancement Program.

# DBMD Worksheet Instructions

## Step 1 – Enter Required Data

Enter the required data for each service provided. HHSC PFD provides separate spreadsheets for services that require different proposed reimbursement rates. Round all monetary amounts in Step 1 to the nearest whole dollar (with no zeros included for cents). For example, \$25.49 should be rounded to \$25 and \$25.50 to \$26.

## Staff Salaries, Contracted Attendant Salaries, and Wages

- Report accrued salaries and wages for attendants employed or contracted by the provider and those receiving Federal Insurance Contributions Act (FICA) contributions.
- According to program rules, attendants can be contracted labor.
- Salaries and wages include tax-deductible overtime, cash bonuses, and cash incentives paid.
- See the Definitions section for requirements about staff members functioning in more than one capacity.

## FICA and Medicare

Report employer-paid attendant FICA and Medicare taxes. FICA taxes may be allocated based upon the percentage of eligible salaries.

## State and Federal Unemployment

Report federal (FUTA) and state (TUCA) employer-paid attendant unemployment expenses. Unemployment expenses may be allocated based upon a percentage of eligible salaries.

## Workers' Compensation Insurance Premiums

Report premiums for workers' compensation insurance, industrial accident policies, and other similar types of coverage for employee on-the-job injuries for attendants.

Workers' compensation premiums may be allocated based upon the percentage of eligible salaries.

## **Workers' Compensation Paid Claims**

Report medical claims paid for employee on-the-job injuries for attendants. Paid claims may be allocated based upon a percentage of eligible salaries or direct costed.

## **Employee Health Insurance**

Report employer-paid health insurance for attendants. Employer-paid health insurance premiums must be direct costed.

## **Employee Life Insurance**

Report any employer-paid life insurance for attendants. Employer-paid life insurance costs must be direct costed.

## **Other Employee Benefits**

Report any employer-paid disability insurance and retirement contributions for attendants. These benefits must be direct costed. Do not report the following as "Other Employee Benefits":

- The contracted provider's unrecovered cost of meals, room, and board furnished to direct care employees; and
- uniforms, job-related training reimbursements, and job certification renewal fees.

## **Mileage Reimbursement**

Report the mileage reimbursement paid to attendants for using their personal vehicle. Mileage Reimbursement is not subject to payroll taxes. The maximum allowable mileage reimbursement is as follows:

- 1/1/21 – 12/31/21      56.0 cents per mile
- 1/1/22 – 12/31/22      58.5 cents per mile

## Box A

The total attendant cost is the sum of all costs above.

## Box B

Report the total number of Units of Service provided by your attendants to all individual clients during the reporting period. The total is the number of DBMD service units billed, not the number of DBMD service hours. Include units of service provided for which you may not receive reimbursement (e.g., service provided to a client whose doctor's orders are not up to date). Report units of service to two decimal places. For example, report 175.5 units of service as 175.50 and 174 units of service as 174.00.

**NOTE:** All monetary calculations in Steps 2 and 3 should be carried out to **two decimal places**.

## Step 2 – Determine Attendant Cost Per Unit of Service

Divide the total attendant costs from Box A by total units of service from Box B. Enter the result in Box C. This result is your estimated attendant cost per unit of service.

**Note:** For Step 3, please refer to the attached DBMD Payment Rates worksheet to obtain the attendant rate for each participation level.

## Step 3 – Determine the Attendant Rate and Spending Requirement for the Requested Participation Level

### Column A

Enter your requested enhancement level in Column A. This level may be 1 through 35.



## Column B

Enter the requested enhancement level for the attendant rate component in Column B.

## Column C

To calculate the required spending for participating at the enhancement level requested, take the amount in Column B and multiply by 0.90. Enter the result in Column C.

## Column D

Column D shows the difference between the attendant rate component for the requested enhancement level and the required attendant compensation spending for that requested level.

## Column E

In Column E, enter your current attendant cost per service unit from Box C, Step 2. Column E shows your current spending on attendant compensation.

## Column F

Subtract the value in Column E from Column C. If the result of this operation is less than zero, set the result equal to zero. Enter the result in Column F. Column F shows how much to increase your current spending on attendant compensation to meet the attendant spending requirement for your requested level.

## Things to Consider When Making Your Participation Decision

This list is not all-inclusive. Various aspects to consider when deciding whether to participate include:

- Compare your attendant cost per unit of service with the average attendant rates (Column B) and the required attendant spending.
- Look at Column C for each enhancement level. At which enhancement level is your attendant cost per unit of service most comparable?

- At which level of enhancement will you feel most comfortable, considering recoupment for failure to meet spending requirements?
- Consider the impact of reduced turnover (due to paying higher wages) on your recruiting and training expenses.
- Consider the impact of paying higher wages on the quality of care delivered to your clients.
- Consider whether any improvements in the quality of care delivered would lead more clients to select your agency to provide their services, thus leading to a higher utilization rate (i.e., more units of service) for your agency.
- Compare your total operational costs to the total rate to determine your ability to meet the attendant spending requirements.

**Check all calculations to ensure accuracy.**