

Technical Guide Daily Rate Application (DRA)

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Technical Guide Daily Rate Application (DRA)

Section 1: Daily Rate Application (DRA)

The Daily Rate Application (DRA) is used to determine the Daily Billing Unit (DBU) for those individuals who live with one or more individuals in the same setting and share staff. Features of the enhanced DRA include: (1) generates site costs from CPT, (2) allows providers to enter Actuals/generate Billfiles, and (3) allows Users to view Legacy DRA data.

There are three areas of the enhanced DRA.

THE OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES
Medicaid Services System (MSS) - DRA

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Home Site Name: **100 ABC Street** Effective Date: 9/1/2010 End Date: 12/31/9999

Create a New Site

Search for Site by Site Name

Search for Site by Person

Search for Site by Provider

DRA Overview:

DRA Provider Name: UNITED DISABILITY SERVICES, INC. Provider#: 7700143

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Within the County Board portion, the County Board User generates and saves or generates and updates site costs. Costs for each individual associated with the CPT populate in the DRA after costs have been authorized in SPA. Service costs and hours come directly from CPT.

The County Board User clicks on the County Board link. Note that an Alert has populated at the top of the page. The Alert states, "There must be 3 Individuals with Authorized Cost Projections for Provider#: 7700143 with DRA Span: 6/1/2011 to 8/31/2011. Therefore the Generate Site Costs link is disabled. (If there are any Temporary Waiver Spans in the Site then this Count will prevent Site Cost Generation)."

Home Site Name: **100 ABC Street** Effective Date: 9/1/2010 End Date: 12/31/9999

Create a New Site

Search for Site by Site Name

Search for Site by Person

Search for Site by Provider

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Site Costs Provider Actuals Report

Alerts: Close

- There must be 3 Individuals with Authorized Cost Projections for Provider#: 7700143 with DRA Span: 6/1/2011 to 8/31/2011. Therefore the Generate Site Costs link is disabled. (If there are any Temporary Waiver Spans in the Site then this Count will prevent Site Cost Generation)

DRA Provider Spans:

UNITED DISABILITY SERVICES, INC. 7700143

Span:	Start Date:	End Date:	Individual Count:	
+Existing Site Costs	9/1/2010	5/31/2011	3	+Individuals in SPA Generate Site Costs
+Existing Site Costs	6/1/2011	8/31/2011	3	+Individuals in SPA Generate Site Costs

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The Alert populated because Janice17 Kaster17 does not have approved waiver costs for the period of 06/01/2011-08/31/2011. This is due to the fact that Janice17 Kaster17's waiver re-determination for her next waiver year occurs on 06/01/2011.

Site Name: **100 ABC Street**
Effective Date: 9/1/2010
End Date: 12/31/9999

Site Costs
Provider Actuals Report

Alerts: Close

- There must be 3 Individuals with Authorized Cost Projections for Provider#: 7700143 with DRA Span: 6/1/2011 to 8/31/2011. Therefore the [Generate Site Costs](#) link is disabled. (If there are any Temporary Waiver Spans in the Site then this Count will prevent Site Cost Generation)

DRA Provider Spans:

UNITED DISABILITY SERVICES, INC. 7700143

Span:	Start Date:	End Date:	Individual Count:		
+Existing Site Costs	9/1/2010	5/31/2011	3	-Individuals in SPA	Generate Site Costs

Individuals in SPA:

Individual	DODD #	Authorized	Waiver Status	Waiver-Code	Waiver Start	Waiver End	Total Cost	Total Units
Mark17 Vane17	6008910	6/28/2013 : 12:00 AM	NONWAIVER	I/O-ADL	9/1/2010	8/31/2011	\$49,918.02	11250.00
JANICE17 Kaster17	6004758	6/28/2013 : 12:00 AM	ENRL	I/O-ADL	6/1/2010	5/31/2011	\$49,918.02	11250.00
JENNIFER17 Driftwood17	6002161	6/28/2013 : 12:00 AM	ENRL	I/O-ADL	9/1/2010	8/31/2011	\$64,046.31	12331.16

Span:	Start Date:	End Date:	Individual Count:		
+Existing Site Costs	6/1/2011	8/31/2011	3	-Individuals in SPA	Generate Site Costs

Individuals in SPA:

Individual	DODD #	Authorized	Waiver Status	Waiver-Code	Waiver Start	Waiver End	Total Cost	Total Units
Mark17 Vane17	6008910	6/28/2013 : 12:00 AM	NONWAIVER	I/O-ADL	9/1/2010	8/31/2011	\$16,770.48	3780.00
JENNIFER17 Driftwood17	6002161	6/28/2013 : 12:00 AM	ENRL	I/O-ADL	9/1/2010	8/31/2011	\$21,505.28	4138.80

The County Board User should verify that the individuals' waiver status (e.g. ENRL), waiver-code (e.g. I/O-ADL), waiver start (e.g. 9/1/2010), waiver end (e.g. 8/31/2011), total costs (e.g. \$64,046.31), and total units (e.g. 12331.16) are correct.

The County Board User next clicks on the [Generate Site Costs](#) link. This populates the following DRA site costs details for the selected span: start date of the cost span, end date of the cost span, total number of days, total costs, total hours, hourly rate, and number of individuals sharing services during the cost span.

Site Name: **100 ABC Street**
Effective Date: 9/1/2010
End Date: 12/31/9999

Site Costs
Provider Actuals Report

Alerts: Close

- There must be 3 Individuals with Authorized Cost Projections for Provider#: 7700143 with DRA Span: 6/1/2011 to 8/31/2011. Therefore the [Generate Site Costs](#) link is disabled. (If there are any Temporary Waiver Spans in the Site then this Count will prevent Site Cost Generation)

DRA Provider Spans:

UNITED DISABILITY SERVICES, INC. 7700143

Span:	Start Date:	End Date:	Individual Count:		
+Existing Site Costs	9/1/2010	5/31/2011	3	+Individuals in SPA	Generate Site Costs

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Site Name: 100 ABC Street		Effective Date: 9/1/2010	End Date: 12/31/9999
DRA Provider			
Name:	UNITED DISABILITY SERVICES, INC.		
MBS Contract Number:	7700143	DRA Provider Begin Date:	9/1/2010
		DRA Provider End Date:	5/31/2011

Site Costs	Generated Site Costs	Provider Actuals Report
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Generated Site Costs:

Select Span:	StartDate:	EndDate:	# of Days:	Total Cost:	Total Hours:	Hourly Rate:	# of Individuals:
Details	9/1/2010	5/31/2011	273	\$163,882.35	8707.79	18.82	3

Individual Details:

Individual Name	DODD #	Waiver Status	Waiver-Code	Hrly Rate	Hrs Per Day	Span Cost	Span Units	Span Hrs	%
JENNIFER17 Driftwood17	6002161	ENRL	I/O - ADL	\$20.78	11.29	\$64,046.31	12331.16	3082.79	39.08 %
JANICE17 Kaster17	6004758	ENRL	I/O - ADL	\$17.75	10.30	\$49,918.02	11250.00	2812.50	30.46 %
Mark17 Vane17	6008910	NONWAIVER	I/O - ADL	\$17.75	10.30	\$49,918.02	11250.00	2812.50	30.46 %

Save Site Cost:	New Site Cost Effective Date: 9/1/2010	New Site Cost End Date: 5/31/2011	# of Days: 273	New Site Cost: 163882.35	New Site Cost Hours: 8707.79
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The County Board User should verify the DRA Cost Span's start date, end date, total number of days, total costs, total hours, and hourly rate. Additionally, the County Board User should verify that the individuals' waiver status (e.g. ENRL), waiver-code (e.g. I/O-ADL), hourly rate (e.g. \$20.78), hours per day (e.g. 11.29), span costs (e.g. \$64,046.31), span units (e.g. 12331.16), span hours (e.g. 3082.79), and percentage (e.g. 39.08%) are correct.

The last step requires the County Board User to click on the Save Site Cost link. This "moves" these costs from the County Board side of the enhanced DRA to the Provider side of the enhanced DRA.

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Site Name: 100 ABC Street		Effective Date: 9/1/2010	End Date: 12/31/9999
DRA Provider			
Name:	UNITED DISABILITY SERVICES, INC.		
MBS Contract Number:	7700143	DRA Provider Begin Date:	9/1/2010
		DRA Provider End Date:	5/31/2011

Site Costs	Generated Site Costs	Provider Actuals Report
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Generated Site Costs:

Select Span:	StartDate:	EndDate:	# of Days:	Total Cost:	Total Hours:	Hourly Rate:	# of Individuals:
Details	9/1/2010	5/31/2011	273	\$163,882.35	8707.79	18.82	3

Individual Details:

Individual Name	DODD #	Waiver Status	Waiver-Code	Hrly Rate	Hrs Per Day	Span Cost	Span Units	Span Hrs	%
JENNIFER17 Driftwood17	6002161	ENRL	I/O - ADL	\$20.78	11.29	\$64,046.31	12331.16	3082.79	39.08 %
JANICE17 Kaster17	6004758	ENRL	I/O - ADL	\$17.75	10.30	\$49,918.02	11250.00	2812.50	30.46 %
Mark17 Vane17	6008910	NONWAIVER	I/O - ADL	\$17.75	10.30	\$49,918.02	11250.00	2812.50	30.46 %

Save Site Cost:	New Site Cost Effective Date: 9/1/2010	New Site Cost End Date: 5/31/2011	# of Days: 273	New Site Cost: 163882.35	New Site Cost Hours: 8707.79
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Site Name: 100 ABC Street		Effective Date: 9/1/2010	End Date: 12/31/9999
DRA Provider			
Name:	UNITED DISABILITY SERVICES, INC.		
MBS Contract Number:	7700143	DRA Provider Begin Date:	9/1/2010
		DRA Provider End Date:	5/31/2011

Site Costs	Generated Site Costs	Provider Actuals Report
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Alerts: Close

- Your Site Cost has been Saved.

Generated Site Costs:

Select Span:	StartDate:	EndDate:	# of Days:	Total Cost:	Total Hours:	Hourly Rate:	# of Individuals:
Details	9/1/2010	5/31/2011	273	\$163,882.35	8707.79	18.82	3

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Within the Provider portion, the Provider User enters Actuals and generates billfiles.



The screenshot shows the DRA interface with the 'Providers' menu item highlighted in the left sidebar by a red arrow. The main content area displays site information for '100 ABC Street' and a table of site costs.

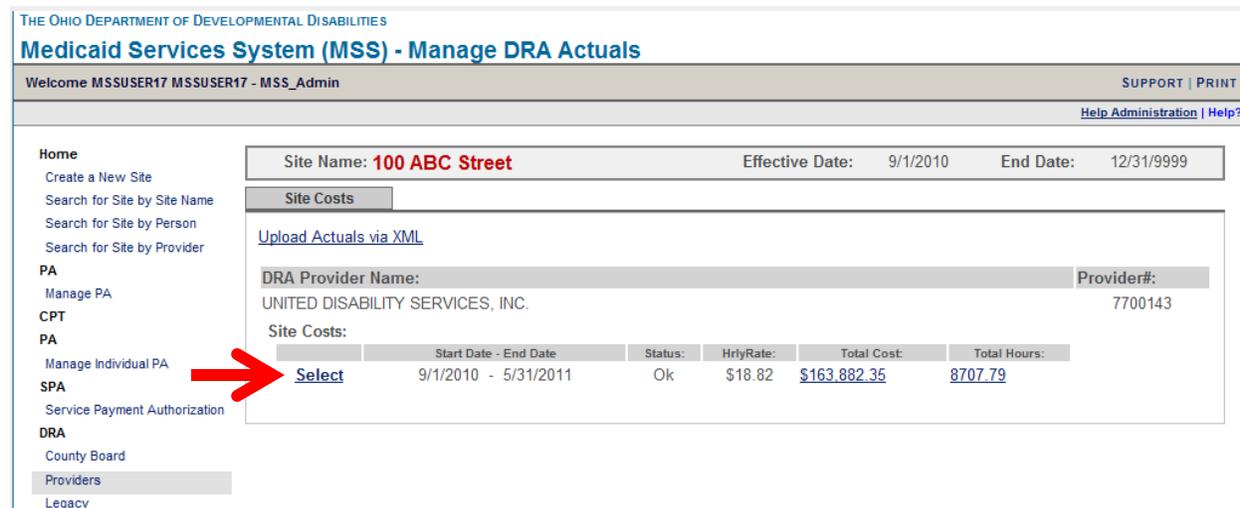
Start Date - End Date	Status	HrlyRate	Total Cost	Total Hours
9/1/2010 - 5/31/2011	Ok	\$18.82	\$163,882.35	8707.79

The Provider User can enter Actuals into the enhanced DRA in one of two ways. In the first, the Provider can upload their Actuals via the Upload Actuals via XML link.



The screenshot shows the DRA interface with a red arrow pointing to the 'Upload Actuals via XML' link in the main content area. The sidebar menu is visible on the left.

In the second, the Provider User manually creates an Actual in the enhanced DRA. The Provider User first selects the Site Cost Span to which the provider needs to add an Actual to. In the example, there is only one Site Cost Span to choose from (e.g. 09/01/2010-05/31/2011). The Provider User clicks on the Select link to access that Site Cost Span.



The screenshot shows the Medicaid Services System (MSS) interface. The 'Select' link in the site costs table is highlighted with a red arrow. The page header includes 'THE OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES' and 'Medicaid Services System (MSS) - Manage DRA Actuals'.

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The Provider User should review the following details of the utilization portion of that Site Cost Span: Hourly Rate, Total Cost, Total Hours, Average Projected Hours (per week/per day), and Average Projected Costs (per week/per day).

The screenshot shows the 'Site Cost' section for '100 ABC Street' with an effective date of 9/1/2010 and an end date of 12/31/9999. The table below provides detailed utilization metrics:

Provider:	7700143	UNITED DISABILITY SERVICES, INC.	Hourly Rate:	\$18.82	Total Cost:	\$163,882.35	Total Hours:	8707.79
Start:	9/1/2010	End: 5/31/2011	Average Projected Hours:	223.28/week 31.90/day	Used:	\$0.00		0.00
Average Actual Hours:	0.00/week		Available:	\$163,882.35				8707.79
Average Projected Costs:	\$4,202.11/week \$600.30/day		Estimated Span Overage Cost:	\$0	% Overage:	0.00 %		
Average Actual Costs:	\$0.00/week							

Navigation links: [New Actual Span](#) | [New MBS Billing File For Span](#)



The Provider User next clicks on the [New Actual Span](#) link to begin creating the Actual.

The screenshot shows the 'Actual Spans' section with a red arrow pointing to the [New Actual Span](#) link.

The Provider User enters a start date, end date and total number of staff hours delivered during that seven day period into the Add New actual Span pop up box. An Actual's start date and end date can only be up to a maximum of seven consecutive (7) days. Those seven consecutive days must fit within the current Site Cost Span.

The screenshot shows the 'Add New Actual Span' pop-up box with the following fields:

Start:	End:	Total Hours:
09/01/2010	09/07/2010	223

A red arrow points to the 'Start' field.

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When the Provider User calculates the total number of staff hours, the provider should only include those staff hours based on the how many hours each staff person worked per shift for that day starting at 12:00 AM and ending at 11:59 PM. For example, on Sunday June 30, 2013 United Disability Services, Inc. provided the following staff hours to Jennifer17 Driftwood17 and her roommates. Staff person A came in and worked from 12:00 AM to 7:30 AM for a total of 7.5 hours. Staff person B came in and worked from 7:30 AM to 1:00 PM for a total of 5.5 hours. Finally, Staff person C & staff person D both came in and worked from 1:00 PM to 11:59 PM for a total of 22 hours (both staff person C & staff person D worked an 11 hour shift, so $2 \times 11 = 22$). So the total number of staff hours the provider would have delivered on this day would be 35 hours.

After the Provider User has completed the details of the Actual, they click on the **Save** button to “save” the Actual.

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Site Name: **100 ABC Street** Effective Date: 9/1/2010 End Date: 12/31/9999

Site Cost					
Provider:	7700143	UNITED DISABILITY SERVICES, INC.		Total Cost:	\$163,882.35
Start:	9/1/2010	End:	5/31/2011	Hourly Rate:	\$18.82
Average Projected Hours:	223.28/week 31.90/day		Used:	\$0.00	8707.79
Average Actual Hours:	0.00/week		Available:	\$163,882.35	8707.79
Average Projected Costs:	\$4,202.11/week \$600.30/day		Estimated Span Overage Cost:	\$0	% Overage: 0.00 %
Average Actual Costs:	\$0.00/week				

Site Costs **Actual Spans**

Add New Actual Span ✕

Actual Spans:
[New Actual Span](#)

Start: 09/01/2010 End: 09/07/2010 Total Hours: 223 **Save**

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Site Cost					
Provider:	7700143	UNITED DISABILITY SERVICES, INC.		Total Cost:	\$163,882.35
Start:	9/1/2010	End:	5/31/2011	Hourly Rate:	\$18.82
Average Projected Hours:	223.28/week 31.90/day		Used:	\$0.00	223.00
Average Actual Hours:	223.00/week		Available:	\$163,882.35	8484.79
Average Projected Costs:	\$4,202.11/week \$600.30/day		Estimated Span Overage Cost:	-\$163,882.35	% Overage: -100.00 %
Average Actual Costs:	\$0.00/week				

Messages: Close

Actual Span Saved.

Site Costs **Actual Spans**

Actual Spans:
[New Actual Span](#) | [New MBS Billing File For Span](#)

	Start Date	End Date	Total Hours	Total \$ For Span	Max DBU?
Individual Actuals Edit Remove	9/1/2010	9/7/2010	223.00	\$4,196.90	No

Next the Provider User clicks on the Individual Actuals link to identify which individuals they delivered services to during the seven (7) day period.

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Site Costs **Actual Spans**

Actual Spans:
[New Actual Span](#) | [New MBS Billing File For Span](#)

	Start Date	End Date	Total Hours	Total \$ For Span	Max DBU?
Individual Actuals Edit Remove	9/1/2010	9/7/2010	223.00	\$4,196.90	No

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The Provider User can either check each box for every individual for those days the provider delivered services during the seven (7) day period, or the Provider User can click on the [All](#) link located under the [Return to Actual Span Manage](#) link to auto fill every check box for every individual. If the provider did not deliver services to each individual for every day in the seven (7) day period, the Provider User will need to uncheck each box for those days the provider did not deliver services to that individual.

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Site Costs | Actual Spans | Individual Actuals

Individual Actuals
[Return to Actual Span Manager](#)

Check [All](#) | [None](#)

Individual	Client #	9/1	9/2	9/3	9/4	9/5	9/6	9/7
JENNIFER17 Driftwood17	6002161	<input checked="" type="checkbox"/>						
JANICE17 Kaster17	6004758	<input checked="" type="checkbox"/>						
Mark17 Vane17	6008910	<input checked="" type="checkbox"/>						

Generate Billfile | Update service days/re-calculate Actuals

Individuals Summary:

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	0.00 %	\$0.00	0	\$0.00	\$64,046.31
JANICE17 Kaster17	6004758	0.00 %	\$0.00	0	\$0.00	\$49,918.02
Mark17 Vane17 *	6008910	0.00 %	\$0.00	0	\$0.00	\$49,918.02

Next the Provider User clicks on the **Update services days/re-calculate Actuals** button. The application will then calculate the Daily Billing Unit (DBU) for each individual for that seven (7) day period. The DBU is not a day rate, but rather as stated earlier a Daily Billing Unit. This means that there can be more than one H/PC provider delivering services to individuals in the home on the same day. The provider who delivers the most amount of service will generate their billing through the DRA, and the other provider(s) will bill in fifteen (15) minute units.

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Start: 9/1/2010 End: 9/7/2010 Over DBU: N Total Cost: \$4,196.90 Total Hours: 223.00

Site Costs | Actual Spans | Individual Actuals

Individual Actuals
[Return to Actual Span Manager](#)

Check [All](#) | [None](#)

Individual	Client #	9/1	9/2	9/3	9/4	9/5	9/6	9/7
JENNIFER17 Driftwood17	6002161	<input checked="" type="checkbox"/>						
JANICE17 Kaster17	6004758	<input checked="" type="checkbox"/>						
Mark17 Vane17	6008910	<input checked="" type="checkbox"/>						

Generate Billfile | Update service days/re-calculate Actuals

Individuals Summary:

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	39.08 %	\$1,640.18	7	\$234.31	\$62,406.13
JANICE17 Kaster17	6004758	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65
Mark17 Vane17 *	6008910	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65

It is important for the provider to know that the maximum DBU that Medicaid will pay for an individual is \$403.98. In the example, Jennifer17 Driftwood17's DBU is \$234.31, Janice17 Kaster's DBU is \$182.62, and Mark17 Vane17's DBU is \$182.62. So the provider will be reimbursed for the entire DBU for each of these individuals.

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Notice that Mark17 Vane17 has a red asterisk (*) to the right of his name. This is to remind the provider that Mark17 Vane17 is a non-waiver recipient.

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Site Costs | Actual Spans | **Individual Actuals**

Individual Actuals
[Return to Actual Span Manager](#)
Check All | None

Individual	Client #	9/1	9/2	9/3	9/4	9/5	9/6	9/7
JENNIFER17 Driftwood17	6002161	<input checked="" type="checkbox"/>						
JANICE17 Kaster17	6004758	<input checked="" type="checkbox"/>						
Mark17 Vane17	6008910	<input checked="" type="checkbox"/>						

Generate Billfile | Update service days/re-calculate Actuals

Individuals Summary:

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	39.08 %	\$1,640.18	7	\$234.31	\$62,406.13
JANICE17 Kaster17	6004758	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65
Mark17 Vane17 *	6008910	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65

By placing the cursor over Mark17 Vane17's name, the Provider User will notice that a pop up box will appear with the message, "Mark17 Vane17 is in a Non-Waiver Status. So the Max DUB Rules will not apply here." This means that Mark17 Vane17's DBU can be greater than \$403.98. This is due to the fact that the provider will not be billing Medicaid for Mark17 Vane17's services. Instead, the provider will be billing the local county board for Mark17 Vane17's since his services are being funded through the local county board's levy funds.

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Site Costs | Actual Spans | **Individual Actuals**

Individual Actuals
[Return to Actual Span Manager](#)
Check All | None

Individual	Client #	9/1	9/2	9/3	9/4	9/5	9/6	9/7
JENNIFER17 Driftwood17	6002161	<input checked="" type="checkbox"/>						
JANICE17 Kaster17	6004758	<input checked="" type="checkbox"/>						
Mark17 Vane17	6008910	<input checked="" type="checkbox"/>						

Generate Billfile | Update service days/re-calculate Actuals

Individuals Summary:

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	39.08 %	\$1,640.18	7	\$234.31	\$62,406.13
JANICE17 Kaster17	6004758	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65
Mark17 Vane17 *	6008910	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65

Mark17 Vane17 is in a Non-Waiver Status. So the Max DBU Rules will not apply here.

The Provider User lastly clicks on the **Generate Billfile** button to create a billfile. The billfile is a flatfile document that will contain the provider's billing information that they will submit to the Department via an upload to the enhanced Medicaid Billing System (eMBS) application.

Generate Billfile | Update service days/re-calculate Actuals

Individuals Summary:

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	39.08 %	\$1,640.18	7	\$234.31	\$62,406.13
JANICE17 Kaster17	6004758	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65
Mark17 Vane17 *	6008910	30.46 %	\$1,278.36	7	\$182.62	\$48,639.65

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When the Provider User clicks on the **Generate Billfile** button, a pop up box will appear that allows the User to either open the file, save the file, or cancel the file.

The screenshot shows the DRA application interface. On the left is a navigation menu with options like Home, Create a New Site, Search for Site by Site Name, Search for Site by Person, Search for Site by Provider, PA, Manage PA, CPT, PA, Manage Individual PA, SPA, Service Payment Authorization, DRA, County Board, Providers, Legacy, and REPORTS. The main content area displays site information for '100 ABC Street' with an effective date of 9/1/2010 and an end date of 12/31/9999. It includes sections for Site Cost, Actual Span, and Individual Actuals. A 'Generate Billfile' button is visible. A 'File Download' dialog box is open, asking 'Do you want to open or save this file?' with details: Name: M7700143_100ABCStr_20100901_20100907.txt, Type: Text Document, From: mss.trnapps.dodd.ohio.gov. The dialog has 'Open', 'Save', and 'Cancel' buttons. Below the dialog is an 'Individuals Summary' table.

Individual	Client #	%	Individual Contribution	# Days	DBU	Remaining \$
JENNIFER17 Driftwood17	6002161	39.08 %	\$1,640.18	7	\$234.31	\$62,406.13
JANICE17 Kaster17	6004758	30.46 %	\$1,278.36	7	\$182.62	\$48,839.65
Mark17 Vane17 *	6008910	30.46 %	\$1,278.36	7	\$182.62	\$48,839.65

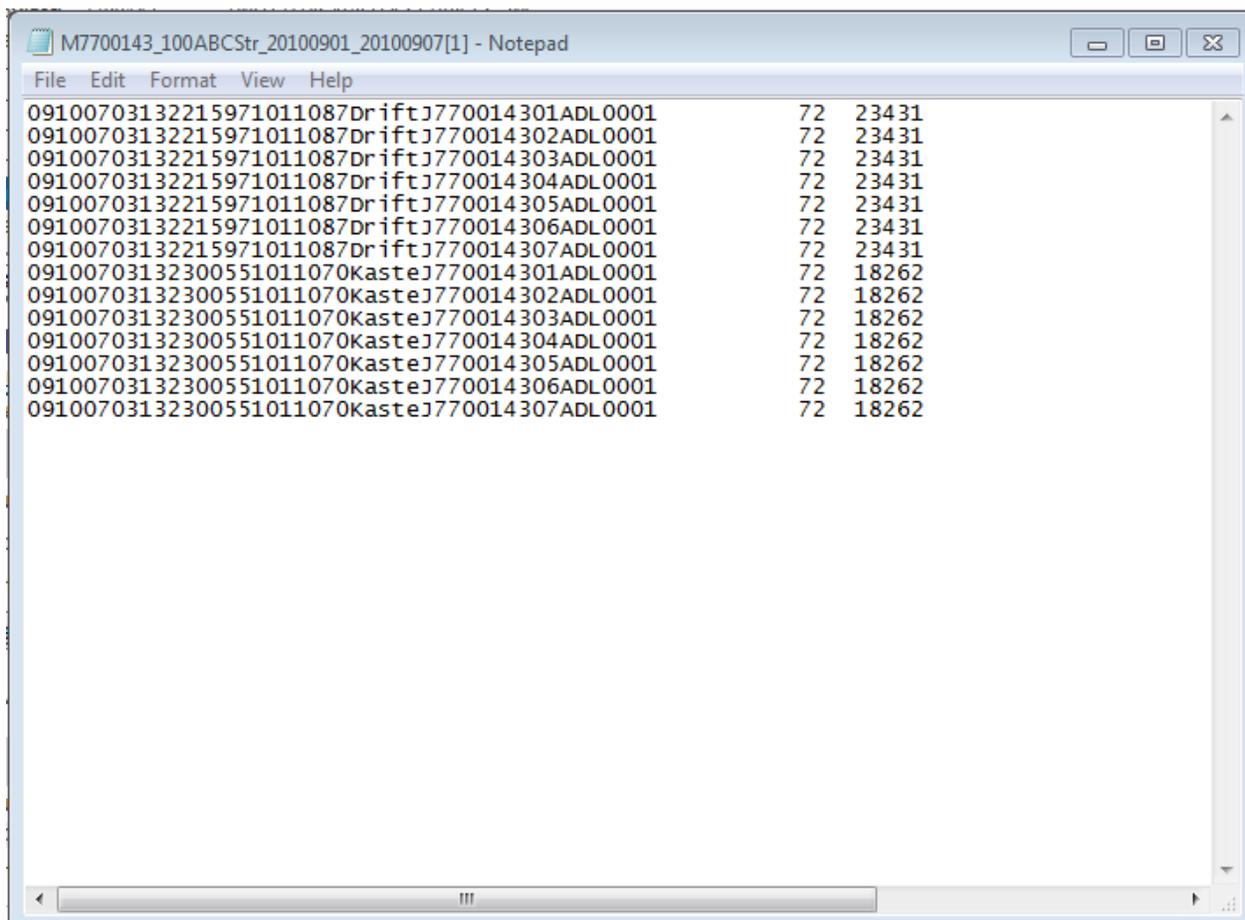
The Provider User will click on the **Save** button to “save” the billfile to their personal computer or laptop. The Provider User will need to determine where to save the billfile so that later when they upload the billfile to the eMBS application they are able to locate the billfile on their personal computer or laptop.

The screenshot shows the DRA application interface with a 'Save As' dialog box open. The dialog box is titled 'Save As' and shows the 'Desktop' location. It contains a list of folders including Libraries, Documents, Music, Pictures, Videos, Computer, and Local Disk (C:). The file name is 'M7700143_100ABCStr_20100901_20100907' and the save as type is 'Text Document'. The dialog has 'Save' and 'Cancel' buttons. The background shows the same application interface as the previous screenshot, with the 'Generate Billfile' button visible.

Technical Guide Daily Rate Application (DRA)

The flatfile contains the following information (reading from left to right):

- characters one and two are the month (e.g. 09)
- characters three and four are the year (e.g. 10)
- characters five through ten are the current date (e.g. 070313)
- character eleven is always a "2"
- characters twelve through twenty-three are the individual's twelve digit Medicaid number (e.g. 215971011087)
- characters twenty-four through twenty-eight are the first five letters on the individual's last name (e.g. Drift)
- character twenty-nine is the first letter of the individual's first name (e.g. J)
- characters thirty through thirty-six are the seven (7) digit provider number (e.g. 7700143)
- characters thirty-seven through thirty-eight are the day's date (e.g. 01)
- characters thirty-nine through forty-one are the billing code (e.g. ADL)
- characters forty-two through forty-five are the number of units (e.g. 0001)
- characters forty-six through forty-seven are the county board's number (e.g. 72=Sandusky)
- characters forty-eight through fifty-two are the DBU claim amount without the decimal (e.g. \$234.31)



M7700143_100ABCStr_20100901_20100907[1] - Notepad

```
File Edit Format View Help
09100703132215971011087DriftJ770014301ADL0001      72  23431
09100703132215971011087DriftJ770014302ADL0001      72  23431
09100703132215971011087DriftJ770014303ADL0001      72  23431
09100703132215971011087DriftJ770014304ADL0001      72  23431
09100703132215971011087DriftJ770014305ADL0001      72  23431
09100703132215971011087DriftJ770014306ADL0001      72  23431
09100703132215971011087DriftJ770014307ADL0001      72  23431
09100703132300551011070KasteJ770014301ADL0001      72  18262
09100703132300551011070KasteJ770014302ADL0001      72  18262
09100703132300551011070KasteJ770014303ADL0001      72  18262
09100703132300551011070KasteJ770014304ADL0001      72  18262
09100703132300551011070KasteJ770014305ADL0001      72  18262
09100703132300551011070KasteJ770014306ADL0001      72  18262
09100703132300551011070KasteJ770014307ADL0001      72  18262
```

Technical Guide Daily Rate Application (DRA)

Note that the flatfile does not contain billing information for Mark17 Vane17. Due to Mark17 being a non-wavier recipient his services cannot be billed to Medicaid nor can the provider's claims be submitted through eMBS for payment. The provider will need to submit these claims to the local county board for reimbursement.

Only H/PC services (e.g. H/PC, OSOC, and H/PC OSOC Mix) billing are generated through the DRA. The provider will submit claims for all other Medicaid waiver services (i.e. H/PC transportation, NMT, ADS, Adult Foster Care, etc.) by completing separate entries into eMBS.

Within the Legacy portion, both County Board User(s) and Provider User(s) will be able to view Legacy DRA information.

THE OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES
Medicaid Services System (MSS) - View Legacy DRA
Welcome MSSUSER17 MSSUSER17 - MSS_Admin SUPPORT | PRINT
Help Administration | Help?

Home
Create a New Site
Search for Site by Site Name **Site Name: 100 ABC Street** Effective Date: 9/1/2010 End Date: 12/31/9999
Search for Site by Person Search Legacy DRA
Search for Site by Provider

PA
Manage PA
CPT
PA
Manage Individual PA
SPA
Service Payment Authorization
DRA
County Board
Providers
Legacy

After clicking on the Search Legacy DRA link, the User will be able to search for the Legacy DRA sites based on those providers associated with the current CPT site.

THE OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES
Medicaid Services System (MSS) - Search Legacy DRA
Welcome MSSUSER17 MSSUSER17 - MSS_Admin SUPPORT | PRINT
Help Administration | Help?

Home
Create a New Site
Search for Site by Site Name **Site Name: 100 ABC Street** Effective Date: 9/1/2010 End Date: 12/31/9999
Search for Site by Person
Search for Site by Provider

PA
Manage PA
CPT
PA
Manage Individual PA
SPA
Service Payment Authorization
DRA
County Board
Providers
Legacy
REPORTS

Legacy DRA Sites Search/Associate Area

CPT Site Available Providers: CHAMPAIGN RESIDENTIAL
Legacy DRA Site#: CHAMPAIGN RESIDENTIAL
Legacy Site Name: JOYCE CARROTHERS
RECREATION UNLIMITED
SANDUSKY CO BD DD
UNITED DISABILITY SER

Technical Guide Daily Rate Application (DRA)

The User will either need to know the Legacy DRA site# or the Legacy Site Name. The User will only need to enter the information of one field in order to click on the **Search** button to initiate the search.

The application will generate the site from Legacy DRA. The User can then associate the Legacy DRA site to the CPT by clicking on the Associate to CPT site link.

Once the Legacy DRA site is associated with the CPT, the User will be able to review the Site Cost Spans which contain hourly rates; total costs authorized by the county board; used costs, available costs, total hours, used hours and available hours based on Actuals created by the provider in the Legacy DRA site.

	Start Date:	End Date:	HrlyRate:	Total Cost:	Used Cost:	Avail Cost:	Total Hrs:	Used Hrs:	Avail Hrs:
Cost Detail+	3/1/2008	7/1/2008	\$22.22	\$70,163.83	\$68,458.07	\$1,705.76	3157.00	3080.25	76.75
Cost Detail+	7/2/2008	12/31/2008	\$21.52	\$88,816.04	\$88,724.58	\$91.46	4127.00	4122.75	4.25
Cost Detail+	1/1/2009	4/10/2009	\$21.14	\$49,152.66	\$47,968.77	\$1,183.89	2325.00	2269.00	56.00
Cost Detail+	4/11/2009	12/15/2009	\$22.21	\$126,218.10	\$123,275.45	\$2,942.65	5682.00	5549.53	132.47
Cost Detail+	12/16/2009	12/31/2009	\$23.40	\$9,243.52	\$9,026.12	\$217.40	395.00	385.71	9.29
Cost Detail+	1/1/2010	12/31/2010	\$23.49	\$210,870.18	\$20,207.32	\$190,662.86	8977.00	860.25	8116.75

Technical Guide Daily Rate Application (DRA)

PA
Manage PA

CPT

PA
Manage Individual PA

SPA
Service Payment Authorization

DRA
County Board
Providers
Legacy

REPORTS

Provider:	Site#:	Name:	County:	Address:	
7700143	11704	UDS Sand Run Pkwy.	SUMMIT	368129 SAN Street	Disassociate

Site# 11704 SiteCost Summary:

	Start Date:	End Date:	HrlyRate:	Total Cost:	Used Cost:	Avail Cost:	Total Hrs:	Used Hrs:	Avail Hrs:
-Cost Detail	3/1/2008	7/1/2008	\$22.22	\$70,163.83	\$68,458.07	\$1,705.76	3157.00	3080.25	76.75

Actual Spans:

	Start Date:	End Date:	Actual Costs:	Actual Hours:
Actual Detail+	3/1/2008	3/7/2008	\$3,689.32	166.00
Actual Detail+	3/8/2008	3/14/2008	\$4,156.05	187.00
Actual Detail+	3/15/2008	3/21/2008	\$3,878.24	174.50
Actual Detail+	3/22/2008	3/28/2008	\$3,900.46	175.50
Actual Detail+	3/29/2008	4/4/2008	\$3,878.24	174.50
Actual Detail+	4/5/2008	4/11/2008	\$3,889.35	175.00
Actual Detail+	4/12/2008	4/18/2008	\$4,156.05	187.00
Actual Detail+	4/19/2008	4/25/2008	\$4,244.95	191.00
Actual Detail+	4/26/2008	5/2/2008	\$3,878.24	174.50
Actual Detail+	5/3/2008	5/9/2008	\$3,711.55	167.00
Actual Detail+	5/10/2008	5/16/2008	\$3,822.67	172.00
Actual Detail+	5/17/2008	5/23/2008	\$4,000.47	180.00
Actual Detail+	5/24/2008	5/30/2008	\$3,850.45	173.25
Actual Detail+	5/31/2008	6/6/2008	\$3,922.68	176.50
Actual Detail+	6/7/2008	6/13/2008	\$3,867.12	174.00
Actual Detail+	6/14/2008	6/20/2008	\$3,655.99	164.50
Actual Detail+	6/21/2008	6/27/2008	\$3,733.77	168.00
Actual Detail+	6/28/2008	7/1/2008	\$2,222.48	100.00

Cost Detail+	7/2/2008	12/31/2008	\$21.52	\$88,816.04	\$88,724.58	\$91.46	4127.00	4122.75	4.25
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Due to the fact that individuals' level of services can change at any time (i.e. becomes ill and needs to remain home for an extended period of time as opposed to attending day programming), the county board is required to update a CPT to include these additional services. If these changes result in the need for additional H/PC services, and these additional H/PC services affect the provider's hourly rate, the Provider may be required to make adjustments when site costs are updated.

In the example, Jennifer17 Driftwood17 had surgery that resulted in her remaining home from her job for a three month period from 09/01/2010 to 11/30/2010. The county board updated the site costs to include the additional hours of H/PC Jennifer 17 Driftwood17 required due to remaining home. An Alert populated on the Provider's side of the DRA after the county board updated (e.g. revised) the site costs.

THE OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES

Medicaid Services System (MSS) - Manage DRA Actuals

Welcome MSSUSER17 MSSUSER17 - MSS_Admin SUPPORT | PRINT

[Help Administration](#) | [Help?](#)

Home

Create a New Site

Search for Site by Site Name

Search for Site by Person

Search for Site by Provider

PA
Manage PA

CPT

PA
Manage Individual PA

SPA
Service Payment Authorization

DRA
County Board
Providers
Legacy

Site Name: 100 ABC Street	Effective Date: 9/1/2010	End Date: 12/31/9999
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Site Costs

[Upload Actuals via XML](#)

DRA Provider Name:	UNITED DISABILITY SERVICES, INC.	Provider#:	7700143
--------------------	----------------------------------	------------	---------

Site Costs:

	Start Date - End Date	Status:	HrlyRate:	Total Cost:	Total Hours:
Select	9/1/2010 - 5/31/2011	Alert	\$19.11	\$162,429.30	8499.29



Technical Guide Daily Rate Application (DRA)

The provider clicked on the Alert link. The Alert informed the provider of changes in each individual's percentage change, site cost change (e.g. -1,453.05), site hour change (e.g. -208.50), and hourly rate change (e.g. 0.29). This means that site costs increased by \$1,453.05, site hours increased by 208.50, and the hourly rate went from \$18.82 to \$19.11.

The screenshot shows the 'Site Costs' interface. On the left is a navigation menu with options like 'Search for Site by Site Name', 'Manage PA', 'CPT', 'PA', 'SPA', 'DRA', 'County Board', 'Providers', 'Legacy', and 'REPORTS'. The main content area has a 'Site Costs' header and an 'Upload Actuals via XML' link. Below this is an orange alert box with a 'Close' button and a red arrow pointing to it. The alert contains the following text:

- JENNIFER17 Driftwood17 had a Percentage Change from 39.08% to 43.31%.
- JANICE17 Kaster17 had a Percentage Change from 30.46% to 28.34%.
- Mark17 Vane17 had a Percentage Change from 30.46% to 28.34%.
- Site Cost Change: -1,453.05, Site Hours Change: -208.50 and Hourly Rate Change: 0.29

Below the alert, the 'DRA Provider Name' is 'UNITED DISABILITY SERVICES, INC.' and the 'Provider#' is '7700143'. A table shows 'Site Costs' with columns for 'Start Date - End Date', 'Status', 'HrlyRate', 'Total Cost', and 'Total Hours'. The current row shows '9/1/2010 - 5/31/2011', 'Recalculate Actuals', '\$19.11', '\$162,429.30', and '8499.29'. A 'Select' button is to the left of the table.

The provider clicks on the Recalculate Actuals link. This will update the DBU of all Actuals within this Site Cost span due to the change in the HrlyRate (hourly rate). This includes those Actuals that the provider had previously submitted from 09/01/2010-10/26/2010. This means that the provider will need to resubmit these Actuals for adjustments through the MBS system.

This screenshot is identical to the previous one, but with two red arrows. One arrow points down to the 'Recalculate Actuals' button in the table, and another arrow points up to the 'Alert' box.

The provider must "clear" the Alert, Recalculate Actuals, and submit the updated Actuals for adjustments. After the provider has completed these actions, the Status of that Site Cost Span changes from Alert to OK. This permits the provider to submit for adjustments and to add new Actuals to the affected Site Cost span.

This screenshot shows the 'Site Costs' interface after the provider has completed the actions. The 'Alert' box is no longer present. The 'Status' in the table has changed from 'Recalculate Actuals' to 'Ok'. A red arrow points down to the 'Ok' status.

Technical Guide Daily Rate Application (DRA)

Section 2: Terms & Definitions

MSS: Medicaid Service System application. Online application that is an “umbrella” system made up of applications that are used to project costs and authorize services.

WMS2: Waiver Management System application. Online application that contains individuals’ current/previous waiver information.

PCW: Provider Certification Wizard application. Online application that contains information regarding all providers of waiver/supported living services that have been certified by the DODD.

IDS: Individual Data System application. Online application that contains information regarding all individuals currently/previiously served by county boards of developmental disabilities.

AAI: Acuity Assessment Instrument. This is the standardized instrument used by Ohio to assess the relative needs and circumstances of an individual compared to other adults in a non-residential setting when receiving the following Adult Day Waiver Services Programs: Adult Day Support, Vocational Habilitation, and Supported Enclave. An individual’s AAI information can be located in the AAI portion of the individual’s record in IDS.

ODDP: Ohio Developmental Disabilities Profile. This is a clinical assessment tool that is used to collect information about an individual’s needs and circumstances. The ODDP assigns a score that corresponds to the person’s needs and circumstances related to waiver services.

CPT: Cost Projection Tool. Is the web-based analytical tool, developed and administered by the Department, used to project the cost of Home and Community Based Waiver Services (HCBS) identified in an individual service plans (ISPs) of individuals enrolled on individual option (IO), level one (LV1), and Self-Empowering Life Funding (SELF) HCBS waivers.

COG: Council of Government. A county board of developmental disabilities may enter into an agreement with one or more other county boards of developmental disabilities to establish a regional council in accordance with Chapter 167 of the Revised Code. The agreement shall specify the duties and function to be performed the council, which may include any duty or function a county board is required or authorized to perform under this chapter.

CODB: County of Doing Business. The county where the individual will be receiving the majority of their residential homemaker/personal care services.

H/PC: Homemaker/personal care. Homemaker/personal care means the coordinated provision of a variety of services, supports, and supervision necessary for the health and welfare of an individual which enables the individual to live in the community. These are tasks directed at increasing the independence of the individual with his/her home or community.

Management County: Are county board(s) responsible for the creation of a CPT for an individual for whom the county board maintains the individuals’ IO, LV1, and/or SELF waiver.

Technical Guide Daily Rate Application (DRA)

Associated County: Are county board(s) that are involved in the planning, payment, or authorization of services for an individual.

Behavioral/Medical/ICF Add On: Payment rates for routine homemaker/personal care may be modified to reflect the needs of individuals requiring behavior supports (\$0.63/unit), medical assistance (\$0.12/unit), and ICF transition (\$0.52/unit).

eMBS: enhanced Medicaid Billing System. Online application used by providers to submit Medicaid claims for services delivered to individuals enrolled on the IO, LV1, and SELF waiver for reimbursement.

Active environment: are those details that first appear when a User enters a selected CPT site.

Version: is a “saved” copy of the details of a CPT site. An individual may have multiple versions during the course of their waiver span year dependent on changes to the services needed to meet the individual’s needs.

Congregate Setting: A setting (i.e. single apartment, house, apartment building, etc.) where individuals share the services of the same provider as part of the (HCBS) individual options waiver administered by the Department.

DRA: Daily Rate Application. The online web-based analytical tool, developed and administered by the Department, used by county boards to apportion the cost of H/PC services identified in the ISPs of individuals who share the services of the same provider at the same site as part of the HCBS individual options waiver. The original DRA which was a standalone application is now called the “Legacy” DRA. The DRA associated with the MSS application is called the “Enhanced” DRA.

XML: The automated transfer of data from a provider into the enhanced DRA to populate their Actuals.

Actual: an entry created by a provider into the enhanced DRA identifying the total number of hours and individuals for up to a seven (7) day period.

Billfile: a flatfile document created by the enhanced DRA. The billfile contains the provider’s billing information (e.g. individuals served, service provided, date of service, etc.). The provider will still need to submit the billfile to the eMBS application in order to receive reimbursement.

OSOC: On-site/on-call: A rate paid when no need for supervision or supports is anticipated and a provider must be on-site and available to provide H/PC but is not required to remain awake.

ADWS: Adult Day Waiver Services: Includes the following Medicaid Day Program services: Adult Day Supports (ADS), Vocational Habilitation (Voc Hab), Supported Employment Enclave, and Supported Employment Community.

NMT: Non-medical transportation: Transportation that is used by individuals enrolled in individual options (IO), level one (LV1), and self-empowered life funding (SELF) waivers solely to access adult day support (ADS), integrated employment, supported employment-community (SEC), supported employment-enclave (SEE), and/or vocational habilitation.

Technical Guide Daily Rate Application (DRA)

PA: Prior Authorization: The process to be followed in accordance with OAC 5123: 2-9-07 to authorize an individual funding level for an individual enrolled in the individual options (IO) waiver that exceeds the maximum value of the ODDP funding range.

IRF: Individual Requests Form: Form completed by a county board as part of the request for a prior authorization.

UDS: Universal Data System: online data warehouse where documents submitted by a county board as part of a prior authorization submission are stored.

SPA: Service Payment Authorization: That portion of the MSS application where costs finalized in the Manage Cost projection portion of MSS is authorized by the responsible county board/COG staff.

PAWS: Payment Authorization of Waiver Services: The online web-based application, developed and administered by the Department, used by county boards to authorize the payment of all waiver services identified in the ISPs of individuals enrolled on IO, LV1, and SELF waivers.

PAWS Roll-up Code: Group of several like services budgeted the same.

PERS: Personal Emergency Response System: An electronic device which enables an individual at high risk of institutionalization to secure help in an emergency and may include a portable "help" button to allow for mobility. The system is connected to the individual's phone and programmed to signal a response center staffed by trained professionals once a "help" button is activated. Personal emergency response systems is available only to individuals who live alone or who are alone for significant parts of the day and have no regular caregiver for extended periods of time and who would otherwise require extensive routine supervision.

AFC: Adult Foster Care: personal care and support services provided to an adult by a caregiver who is not related to and lives with the individual receiving the services. Adult foster care is provided in conjunction with residing in the home and is part of the rhythm of life that naturally occurs when people live together in the same home.

Technical Guide Daily Rate Application (DRA)

Section 3: MSS Support

MSS Frequently Asked Questions: MSS Webpage:

<https://doddportal.dodd.ohio.gov/CNT/tools/mss/Pages>. MSS FAQs (PDF).

Training Resources: A list of DODD-trained county board and provider trainers is available of the MSS Webpage: <https://doddportal.dodd.ohio.gov/CNT/tools/mss/Pages>. Statewide MSS Trainers (PDF)

DODD Support Center 1-800-617-6733

- Use Option 2 for technical assistance with MSS
- Use Option 4 for User ID, password, or security affidavit questions for DODD applications.

MSS Questions by email: MSSSupport@dodd.ohio.gov.