Subject: Community Support Service Providers - Federal Financial Participation Rate Change and Continued Billing Requirements Banner Date: September 14, 2018 through October 16, 2018 Cycles: 12, 13, 14, 15 and 16 Provider Types/Specialty: 11/115; 21/221 and 21/222

## Subject: Community Support Service Providers - Federal Financial Participation Rate Change and Continued Billing Requirements

The Centers for Medicare and Medicaid Services (CMS), requires the Commonwealth of Pennsylvania, Department of Human Services, Office of Mental Health and Substance Abuse Services (OMHSAS) to assure all providers affirm payment of state funds prior to submitting invoices to PROMISe<sup>™</sup> for federal reimbursement for recipients served in the fee-for-service program. Documentation should be maintained in the patient's record at the provider entity and the County entity remains responsible for maintaining records of all state monies distributed.

With the start of the new federal fiscal year 2018/2019, which begins on October 1, 2018 the Federal Financial Participation (FFP) rate of reimbursement will change to 52.25 percent; the state portion will be 47.75 percent.

The Department-established fees for these services along with federal and state splits for dates of service on or after October 1, 2018 are:

Individual provider letters will not be generated for the services listed in this RA Alert. The Department-established fees for these services along with federal and state splits for dates of service on or after October 1, 2018 are:

Specialty	Service	Fee	Federal	State
115	Family Based Mental Health Services	\$26.93	\$14.07	\$12.86
221	Resource Coordination – Mental Health	\$12.24	\$6.40	\$5.84
222	Intensive Case Management – Mental Health	\$12.45	\$6.51	\$5.94
222	Blended Case Management – Mental Health	\$12.45	\$6.51	\$5.94

Individual provider letters will not be generated for the services listed in this RA Alert.