MRC Changes Effective 4/5/2022 Provider Tip Sheet

- If your actual hours of service delivery for a month is less than 97% of what was
 projected for a site, you have the option to enter your actual hours and staffing ratios
 into MRC to recalculate your daily rates to more accurately align with the services
 delivered.
 - You will need to enter the actual hours of service delivered and the staffing ratios for each person served in the site.
 - Step by step instructions are available. https://youtu.be/NzPfUeCcZm4
- Upon recalculation and the finalization for the month, a new billing file will be generated for resubmission to DODD through the Medicaid Billing System (MBS). This will result in adjustments to any previously paid claims.
- You may resubmit claims for MRC billing for any sites that fell below 97% threshold for service dates up to 350 days back from the date the claims are submitted. Since this is a monthly recalculation, this will vary between 10 and 11 months depending on the date the claims are submitted.
- You may do this billing independently of the county board (CB). You do not need CB approval or an ISP or PAWS revision to rebill at the recalculated daily rates.
- The recalculation and resubmission of claims is entirely optional. It is advised that you focus on the months and sites that had the greatest variation between projected hours and actual hours delivered.
- Going forward, if you deliver hours for a month that is less than 97% of what was
 projected, the recalculation option will continue to be available. If it is anticipated that
 the under delivery will continue for more than two months, you are encouraged to
 discuss the site with the CB as quickly as possible to revisit the cost projections in the
 CPT.
- The recalculation option will be re-evaluated by the end of the calendar year to determine if it is still a needed option within MRC.
- If you have questions, please direct them to MSSSupport@dodd.ohio.gov.

MRC Changes Effective 4/5/2022 County Board Tip Sheet

- Providers will be able to recalculate daily rates and rebill for under 97% utilization in MRC sites retroactively for 10 to 11 months.
- This function is independent of county boards. No action is required on your part.
- The result of the recalculation may generate additional payments to providers, but the payments will not exceed what is currently projected and authorized.
 - If the CB has drawn down unused ADL funds preventing the provider from rebilling, they may be required to adjust the PAWS to allow for the claims to be processed.
- CBs will be able to view the MRC screens that triggers the recalculation and resubmission of claims, but there is no alert to CBs generated by the MRC.
 - DODD is planning to develop county-specific reports to indicate providers that are utilizing the new feature in MRC. More information will be shared regarding the reports as soon as it becomes available.
- Best practice for underutilization is for the county board to meet with the provider to discuss the causes of the underutilization and to update CPT to reflect reality more accurately.
 - This recalculation option in MRC is offered to help minimize the financial impact to providers by recognizing that it is not always possible for those activities to happen in a timely fashion.
- This does not replace the service planning process. It is important that the planning
 process results in realistic projections of the number of hours that a provider agency will
 be able to offer to successfully staff a site to meet the needs of the people who live
 there.
- The recalculation option will be re-evaluated by the end of the calendar year to determine if it is still a needed option within MRC.
- If you have questions, please direct them to MSSSupport@dodd.ohio.gov.