

**OVERVIEW OF ATTENDANT COMPENSATION RATE ENHANCEMENT FOR
HOME AND COMMUNITY-BASED SERVICES (HCS) AND
TEXAS HOME LIVING (TxHmL)**

- Implementation. Initially implemented September 1, 2010.
- Optional Participation. Participation in the attendant compensation rate enhancement is voluntary.
- Participation Agreement. Contracted providers may choose to participate in the attendant compensation rate enhancement by submitting to the Texas Health & Human Services Commission (HHSC) a signed Enrollment Contract Amendment choosing to enroll and indicating the level of enhanced add-on rate they desire to receive. Requested add-on rate levels will be granted beginning with the lowest level and granting successive levels until requested enhancements are granted within available funds.
- Day Habilitation versus Non-Day Habilitation. For each component code, providers may choose to participate for non-day habilitation services only, day habilitation services only or both non-day habilitation and day habilitation services. Non-day habilitation services include: HCS Supervised Living/Residential Support Services, HCS Supported Home Living, TxHmL Community Support Services, HCS and TxHmL Respite Services, HCS and TxHmL Supported Employment Services and TxHmL Employment Assistance.
- Component Codes. Participation is determined at the component code level.
- Enrollment. Enrollment in the attendant compensation rate enhancement is held in July, prior to the rate year. Funding for the enhancement add-on rate levels is limited by appropriations.
- Attendant revenue enhancements for participants. Providers participating in the attendant compensation rate enhancement agree to spend approximately 90 percent of their total attendant revenues, including their enhanced add-on rate revenues, on attendant compensation. Attendant compensation includes salaries, payroll taxes, benefits, and mileage reimbursement. Participating providers must submit reports to HHSC documenting their spending on attendant compensation.
- Attendant Compensation Spending Accountability. Determination of each provider's compliance with the attendant compensation spending requirement will be made on an annual basis from the cost reports submitted to HHSC. Participants failing to meet their spending requirement for the reporting period will be subject to recoupment. At no time will a participating provider's attendant care rate after their spending recoupment be less than the rate paid to providers not participating in receiving the enhanced add-on rates.

- Grouping. Participating component codes controlled by a single entity can be aggregated to comply with the spending requirement.
- Conditions of Participation for Day Habilitation. The following conditions of participation apply to each HCS and TxHmL provider specifying its wish to have day habilitation services participate in the Attendant Compensation Rate Enhancement.
 - Direct care trainer and job coach compensation and hours must be reported on the required cost report items. This requirement applies to providers who directly provide day habilitation “in-house”, providers who contract with a related party to provide day habilitation and providers who contract with a non-related party to provide day habilitation. Day habilitation costs cannot be combined and reported in one cost report item.
 - The provider must ensure access to any and all records necessary to verify information submitted to HHSC on all reports. This requirement includes ensuring access to records held by the provider, a related-party day habilitation provider and a non-related party day habilitation provider.
 - Failure to comply with the reporting and access requirements detailed above will result in recoupment of all attendant compensation rate enhancement funds associated with the day habilitation service for the provider for the reporting period in question.