

Kenosha County Dept of Human Services Medicaid Newsletter

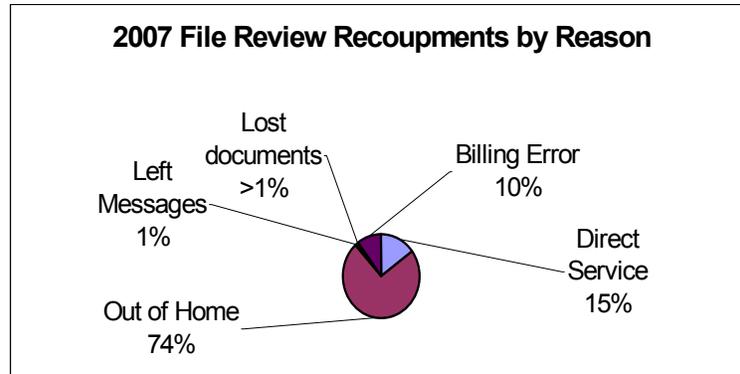
May 2007

Volume 5, Issue 2

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Spring 2007 File Reviews

The Targeted Case Management Files at KAFASI, Prevention Services Network (PSN), Families First, and PSG were reviewed March 5-March 9th. Over 62 client files and 241 claims were reviewed and checked to make sure the billing was appropriate and the documentation was up to Medicaid standards.

Overall, the results were encouraging and much improved over the reviews done in 2006.

File Review Recoupments

Out of 62 files in 2007, \$1766 or around 85 hours of TCM time was recouped and will be given back to Wisconsin Medicaid. Generally, the money was returned because of claims made in error or missing documentation. A breakdown of reasons is on the chart above.

While substantial improvement was made, remember the following points while documenting Medicaid TCM claims:

1. All case notes need to be neat and legible. Make sure the holes punched in the files do not obscure dates or other important information.
2. Each case note (every entry) must be initialed.
3. Wisconsin Medicaid does not cover case management services for children in **out-of-home placement**. If a child is not living with their parent(s) or legal guardian, do not bill Medicaid.
4. Medicaid does not cover "service provision as a part of the case management benefit". Examples of direct service **not covered** as case management services include but are not limited to:... Skill training, taking a client shopping, Transporting a client except as noted...". The only time

transportation can be billed as case management is when the purpose of the trip is “to ensure the service provider is aware of the overall case plan and to monitor the services the provider is delivering.”...Notes need to “clearly establish case management services were performed”. Also the notes need to establish the link to a case plan.

5. The length and detail contained in notes need to be consistent with the amount of time billed, for example a note billing 5-10 minutes can be less detailed than the notes required for billing 1 or more hours. **All** case records should document “what the content of the contact was, why the contact was made, how much time was spent, the date of the contact and where the contact was made.”
6. Make sure to complete forms, including the completion date of assessments. If information is not available, mark NA.
7. As a reminder, “the case manager must review the case plan in writing every six months”... at a minimum. The case manager must initial and date all updates to the plan.

CCS Re-certification

On April 24th, a surveyor from the Office of Quality Assurance came to the Job Center to re-certify the County’s Comprehensive Community Services (CCS) program. The surveyor reviewed policies and procedures, supervisory notes, Coordination committee minutes, background checks on CCS providers and files for four hours.

In his summation comments, the surveyor said he was only able to find one or two deficiencies that he would write up and said he would recommend the program for the maximum two-year certification. The county has since received confirmation that the two-year certification has been awarded.

This is an outstanding honor and accomplishment on the part of Jerry Theis, LCSW and all the Service Facilitators from KHDS, Bell Therapy and Families First and all who are associated with CCS. Congratulations.

