

# Kenosha County Department of Human Services

## Medicaid Newsletter

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### OIG Workplan

Every fall, the HHS Office of Inspector General issues a work plan on the on-going or new investigations it will undertake over the new federal fiscal year.... Below is a brief paragraph on a study they will be doing that may affect you:

#### ***“Targeted Case Management***

*We will determine whether Medicaid payments claimed by States for targeted case management services were in accordance with Federal requirements. Section 1915(g)(2) of the Social Security Act defines case management as services that assist individuals eligible under the State plan in gaining access to needed medical, social, educational, and other services. Case management does not include the direct delivery of an underlying medical, educational, social, or other service to which an eligible individual has been referred. Payments for case management*



*services may not duplicate payments made to public agencies under other program authorities for the same service.”*

Please make sure when billing Medicaid that only TCM services are billed and that direct services are not billed. Keep in mind, Case Management is defined as assisting “recipients and, when appropriate, their families gain access to and coordinate a full array of services, including medical, social, educational, vocational and other services.” (Case Management Handbook, p 7)

### **MA and Persons Detained by Legal Process**

If a person is in jail, do not bill Medicaid for TCM or CCS services.

*“An individual detained by legal process is not eligible for Wisconsin Medicaid benefits. “Detained by legal process” means a person who is incarcerated (including some Huber Law prisoners) because of law violation or alleged law violation, which includes misdemeanors, felonies, delinquent acts, and day-release prisoners. The justice system oversees health care-related needs for individuals detained by legal process.”*

There is some question on 72 hour detentions of minors and whether this constitutes incarceration, however please contact me on a case by case basis.

### **Comprehensive Community Services (CCS)**

Jerry Theis, LCSW has been hired as the new CCS Service Director, effective 10/31/06. Jerry is a Licensed Independent Social Worker with a broad range of clinical, administrative and Quality Assurance experiences, most recently

working at the Acacia Clinic in Milwaukee. One of Jerry's first priorities has been to meet those enrolled in CCS, the Service Facilitators, staff and everyone working on CCS. He has also been making sure the County is able to receive funding for the second year of the CCS QI grant, which brings funds into the community to improve CCS and mental health/ substance abuse services. If you have questions or would like to talk to Jerry, please contact him at 605-6506 or e-mail him at [jtheis@co.kenosha.wi.us](mailto:jtheis@co.kenosha.wi.us).

## **CCS Quality Improvement Grant-Renewed for 2007**

Jerry Theis, CCS Service Director recently sent an e-mail announcing the funding for 2007 of the CCS Quality Improvement Grant that began in 2006. In addition to the benefits listed below in Jerry Theis's letter, this grant brings additional funds to the Kenosha County mental health/substance abuse community:

*"As the new service director for CCS I am pleased to announce the State Bureau of Mental Health and Substance Abuse Services accepted our 2007 CCS Quality Improvement Grant Proposal. This is a continuation of last year's CCS grant The total amount of the 2007 Grant is \$59,318.00!*

*This Grant will allow us to begin to complete the ROSA Front-End work using our Peer Specialists to administer the ROSI survey. Also, we will begin to implement the Illness Management and Recovery – Evidence-Based Practice Model. These two major Quality Improvement Projects will give us data to review how the program is functioning as we focus on ways to continuously improve our program.*

*These past few months has allowed me to get acquainted with the community resources and the dedicated staff working within the CCS program. I have also had the privileged to meet most of the participants in the program and have witnessed first hand their recovery efforts.*

*I wish to thank everyone for his or her contribution to the CCS program and I look forward to working with everyone this year."*

## **MA Targeted Case Management (TCM) Question and Answers**

Occasionally, questions are asked that may be of interest to all TCM Case Managers.

**Q: If a case management client recently becomes Medicaid eligible, can the case manager bill for ongoing monitoring and service coordination case management services even if an Assessment or Plan of Care was not billed to Medicaid?**

**A:** Absolutely, you can bill Medicaid for ongoing service coordination even though MA was not billed for the Assessment or the Plan of Care. " Providers meet Medicaid requirements if the assessment is complete and a current case plan... is in the files."(p.11, TCM Handbook) They need to be in the file, they do not need to have been billed to Medicaid.

**Q: Can the Case Manager bill only for the time spent with the client or can I also bill for travel and documentation time?**

**A:** The handbook clearly states "travel time incurred for covered case management services" is billable to MA. Likewise, "recordkeeping as necessary" is covered. (Pg. 20). The covered in the previous sentence refers to the fact you cannot bill for travel if the client was not at home or you traveled to perform a non-Case management activity.