Kenosha County Department of Human Services
Medicaid Newsletter

"A Newsletter intended for all Contracted Providers of Medicaid services for Kenosha County Department of Human Services"

Changes for 2013

There are quite a few changes being made to the way we do things regarding Targeted Case Management (TCM), the biggest of which is the File Review schedule. A smaller sample of cases will be reviewed for a shorter time frame in an effort to capture more MA revenue that was previously missed. This new process should be less work for providers and will benefit everyone. As was previously done, each provider will have time to look over the prospective cases for review prior to the review being completed.

IMD's (Institutions for Mental Disease)

In many Medicaid programs you often read that you cannot bill Medicaid for services performed while a client is in an IMD. The IMD's most commonly used in the surrounding areas are :
- ❖ Aurora Psychiatric Hospital in Milwaukee
- ❖ Rogers Memorial Hospital in Milwaukee and Waukesha
- ❖ BHD (Behavioral Health Division) in Milwaukee
- ❖ Trempealeau County Health Care Nursing Facility
- ❖ Waukesha County Mental Health Center
- ❖ Winnebago Mental Health Institute
- ❖ And a few others in Brown, Dane, Marathon and Fond du Lac Counties

If you have a question regarding whether or not to bill Medicaid due to a client's living arrangements, please contact me.

How do you determine what is considered a degree in a "human services-related field"?

Another piece of information that many Medicaid programs emphasize is that staff must have a degree in "human services-related field" and one year of experience (or a combination of education and experience), but how do you know if your staff member has a degree that fits into this category since Medicaid
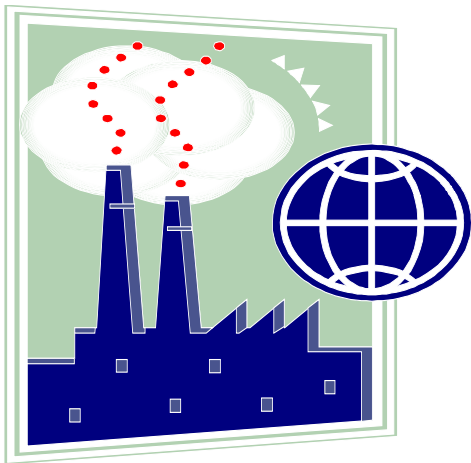
does not define this?

You should review the prospective case manager's records to identify the amount of course work completed in areas relevant to case management, including but not limited to human development, long term care, and psychology.

Case Management Covers

Case management covers gaining access to or coordinating non-Medicaid services including:
- Assisting in accessing energy assistance
- Assisting in accessing housing
- Assisting in accessing legal advocacy
- Assisting in accessing social services
- Setting up a volunteer supportive home care worker to take a member shopping

Assessments should relate to the Target population

Some requirements as explained in

the Medicaid handbook do not directly relate to all target populations. The assessment components should be interpreted in a manner consistent with the member's needs. For example under the educational section, if your client is an infant there may not be "formal" education required, but showing that there is a need for cognitive stimulation covers that part of the assessment.

File Reviews

Files Reviews for CCS were conducted in August. Overall, the files were in good shape. There were a few issues that arose, but the CCS Supervisory team has already put a plan of action in place to correct these issues.

File Reviews for TCM were conducted in June. Overall, the files were much improved from previous years and we had to give back the lowest amount of money we have ever done. Some of the bigger concerns were missing billable time, billing for direct services, and not having credentials everywhere the case manager signs his/her name.