



PROVIDER BULLETIN

BT 200343

JUNE 25, 2003

To: Targeted Case Managers, Nursing Facilities and Hospitals

Subject: Home and Community-Based Services Waiver for Persons Aged and Disabled and Targeted Case Management for the Elderly and Disabled

Overview

This bulletin notifies providers of a new Indiana Health Coverage Programs (IHCP) service called Targeted Case Management (TCM) for the Elderly and Disabled. TCM was approved by the Centers for Medicare & Medicaid Services (CMS) in September 2002 to provide case management services to a targeted population of IHCP-eligible individuals before receipt of services provided by the IHCP Aged and Disabled (A&D) Home and Community-Based Services Waiver.

TCM for the Elderly and Disabled is a specialized form of case management that helps eligible individuals gain access to needed attendant care, respite care, homemaker care, social and other services provided by the A&D Waiver, when the provision for these services would otherwise require the level of care at a nursing facility.

Targeted Case Management Services for Elderly and Disabled

The following is the specific targeted population covered by this service as stated in the TCM waiver:

- Individuals who are: (A) Medicaid recipients, (B) eligible for nursing facility services under Indiana Administrative Code (IAC) 405 IAC 1-3-1 and 405 IAC 1-3-2, (C) applying for admission to a nursing facility following admission to an acute care hospital, (D) expected to continue to receive nursing facility services except for the services available through the A&D Waiver, (E) able to have their health and safety ensured in a community-based setting, and (F) for whom a waiver slot has been identified and funded.
- Individuals who are: (A) Medicaid recipients, (B) current residents of a nursing facility, (C) able to have their health and safety ensured in a community-based setting, (D) eligible for services through the A&D Waiver, and (E) for whom a waiver slot has been identified and funded.
- Individuals who are: (A) Medicaid recipients, (B) eligible for nursing facility services under 405 IAC 1-3-1 and 405 IAC 1-3-2, (C) applying for admission to a nursing facility from a home or community-based setting and have a physician's statement that they are at imminent risk of nursing facility placement, (D) able to have their health and safety ensured in a community-based setting, (E) eligible for services through the A&D Waiver, and (F) for whom a waiver slot has been identified and funded.

Note: Not everyone who expects to receive services from the A&D Waiver is eligible to receive TCM. It is to be provided to only those individuals who meet the qualifications outlined above.

For individuals enrolled in one of the IHCP's managed care programs, the member could receive TCM for the elderly and disabled. However, the targeted case manager should work with the managed care primary medical provider (PMP) who initiates the authorization process for all medical services for Hoosier Healthwise PrimeStep primary care case management (PCCM) or Medicaid Select PCCM members. For members in a Hoosier Healthwise Managed Care Organization (MCO) targeted case managers should coordinate medical services with the MCO.

The following items explain TCM services for elderly and disabled individuals:

- Processing initial referrals and applications
- Assessing individuals for meeting level of care requirements, including obtaining Form 450B, and completing the eligibility screen
- Preparing the initial *Plan of Care/Cost Comparison Budget* including locating and coordinating all proposed services, needed medical, social, educational, other publicly funded services, and informal supports regardless of the funding source.

Providers for Targeted Case Management Services

Agencies authorized to provide TCM for the Elderly and Disabled are the local Area Agencies on Aging (AAA). The AAA must complete a *Billing Provider Application* packet, which is available for download or printing on the IHCP Web site at www.indianamedicaid.com. Agencies should send completed packets to the following address:

Linda Wolcott, Provider Certification Specialist
Bureau of Aging and In-Home Services
MS 21
402 West Washington Street
Indianapolis, IN 46207

Choice of Providers

TCM for the Elderly and Disabled, certified waiver providers, or certified case managers will not restrict the individual's choice of providers for other IHCP services, nor will TCM for the Elderly and Disabled be used to restrict access to other IHCP services.

Eligible individuals of the targeted population can choose from any of the certified Targeted Case Managers for the Elderly and Disabled in their county of residence.

For individuals enrolled in certain IHCP programs, there is a choice of targeted case management providers; however, the member's choice of other providers will be affected by the member's IHCP program enrollment. Members in the Hoosier Healthwise PrimeStep PCCM and Medicaid Select PCCM programs can receive services from any IHCP provider with the appropriate prior authorization and PMP certification. Hoosier Healthwise members of an MCO could be required to obtain medical services from providers contracted with their MCO network.

Billing Information

Providers can bill TCM services upon receiving their provider notification of enrollment letter for TCM for the Elderly and Disabled. Providers can bill service dates retroactive to January 1, 2003, for TCM services to individuals leaving a nursing facility that is not closing or downsizing if the provider that rendered the services has documentation to support the provision of services. All other TCM for the Elderly and Disabled can be billed for service dates retroactive to July 1, 2002, if the provider that rendered the services has documentation to support that the service was provided to the member.

TCM for the Elderly and Disabled persons are services provided prior to the individual being on the A&D Waiver. All of the services listed below should be billed under TCM for the Elderly and Disabled code Z5179:

- Processing initial referrals and applications
- Preparing initial *Plan of Care/Cost Comparison Budget*
- Locating proposed services
- Coordinating with an A&D Waiver case manager, if applicable
- Obtaining the Form 450B from the physician
- Completion of the eligibility screen

The assessment of the individual for meeting the level of care requirements should be billed under the *TCM NF Level of Care Administration* code Z5189.

When the targeted individual receives a place for the A&D Waiver all case management services must be billed under Z5600. These case manager services include: continuing eligibility determinations, links to community services, monitoring service delivery, utilization and outcomes.

Residents of institutions are only eligible to receive TCM in the final six months of institutionalization if they are being discharged to a community placement. Additionally, individuals who are receiving waiver case management services under another waiver cannot receive TCM services for the elderly and disabled.

Table 1 lists the services billed under the IHCP provider number and Table 2 lists those billed under waiver services.

Table 1 – Services Billed by IHCP Provider Number

Bill Under IHCP Provider Number			
Service Description	Procedure Code	Units	Service Activities
TCM for the Elderly and Disabled	Z5179	¼ hour	Processing initial referrals and applications Preparing initial <i>Plan of Care/Cost Comparison Budget</i> Locating proposed services Coordinating with Aged and Disabled Waiver case manager, if applicable Obtaining the Form 450B Completing the eligibility screen
TCM NF Level of Care Administration	Z5189	¼ hour	Assessing the individual to determine if that individual meets the level of care requirements

Table 2 – Services Billed By Waiver Provider Number

Bill Under Waiver Provider Number			
Service Description	Procedure Code	Units	Service Activities
Aged and Disabled Case Management	Z5600	¼ hour	All ongoing case management activities when the individual is on the A&D Waiver

Note: When billing codes Z5179 and Z5189, place the same TCM for the Elderly and Disabled provider number in both fields 24k and 33 on the CMS-1500 claim form.

Additional Information

Direct questions about the information in this bulletin to the Customer Assistance Unit at (317) 655-3240 in the local Indianapolis local area or 1-800-577-1278.

CDT-3/2000 (including procedure codes, definitions (descriptions) and other data) is copyrighted by the American Dental Association. © 1999 American Dental Association. All rights reserved. Applicable Federal Acquisition Regulation System/Department of Defense Acquisition Regulation System (FARS/DFARS) Apply.

CPT codes, descriptions and other data only are copyright 1999 American Medical Association (or such other date of publication of CPT). All Rights Reserved. Applicable FARS/DFARS Apply.